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DURBAN CORPORATION.

MEDICAL OFFICER'S REPORT

FOR THE

Municipal Year ended 31st July, 1925.

DURBAN
Hayne & Gibson, Printers, 31 Field Street,
1926

With the Compliments
of the
Medical Officer of Health.

O. 24.

REPORT
# of the
MEDICAL OFFICER OF HEALTH.

PUBLIC HEALTH COMMITTEE, 1924-25.

Councillor Mrs. E. A. Benson.
Councillor Mrs. A. M. Siedle.
Councillor Mrs. E. L. Knight.
Councillor Mrs. E. S. Fahey.
Councillor H. H. Kemp.
Councillor S. J. Smith.

PUBLIC HEALTH DEPARTMENT.

STAFF.

ADMINISTRATIVE AND OFFICE:

1 Medical Officer of Health ..	S. J. Clegg, O.B.E., M.D., Ch B., D.P.H.
1 Asst. Med. Officer of Health	Vacant.
1 Clerk	E. Posner.
1 Typiste	Vacant.
1 Junior Clerk.	H. E. Duff.

LABORATORY:

1 Indian (Attendant.)

MATERNITY AND CHILD WELFARE:

1 Medical Officer-in-charge ..	K. McNeill, M.B. Ch B., D.P.H.
3 Health Visitors	A. Davies, General Nursing Training Certificate, C.M.B. S. G. Standing, R.S.I. Certificates (2) Nursing Certificate C.M.B. E. A. Woodward, Trained Nurses Certificates C.M.B., R.S.I.
1 Typiste	A. Hunter.
1 Attendant	D. Fox.

INFECTIOUS DISEASES HOSPITAL, CONGELLA.

1 Matron	A. S. Davies, R.G.N., Scotland.
2 Ward Sisters	
3 Staff Nurses.	
5 Probationers.	
1 Seamstress.	
11 Indians (1 Cook, 6 Ward Orderlies, 2 Domestic Boys, 2 Housemaids.)	

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DISINFECTING STATION.

1 Superintendant	C. D. Morning.
2 Assistant Disinfectors	P. W. Anderson, J. Driscoll (temporary).
12 Indians (2 Dhobies, 1 Sirdar 9 Assistants).	

SANITARY DEPARTMENT:

1 Chief Sanitary Inspector	R. Walker Cert. R.S.A., Scotland.
10 Asst. Sanitary Inspectors	T. Hyslop, Cert. R.S.A., Scotland, Cert. Registered Plumber. J. D. Wood, Cert. R.S.I. (Eng.), City and Guilds of London Inst., Cert. Dept. Science and Art, London. F. W. Holmes, Cert. R. S. I. (S.A.). A. E. Moorman, Cert. R.S.I. (S.A.) A. A. Michie, Cert R.S.I. (S.A.) J. W. H. McGreavy, Cert. R.S.I. (S.A.) E. H. Surgeson, Cert R.S.I. (Eng.) C. C. de Lucy, Cert Sant. Meat and Food. Inspection (Manchester,) Cert. Sanitary Science (Hons.), Cert. City and Guilds of London Inst. H. M. Tedder, Cert. R.S.I. (S.A.). A. Kelso.
1 Chief Clerk	A. M. Mc Iver.
1 Second Clerk	A. S. Wood.
1 Third Clerk	R. E. Boutle.
1 Junior Clerk	H. S. Hellett.

SANITARY SUB-DEPARTMENTS:

ANTI-MALARIA:

1 European Overseer	A. E. Clarke.
15 Indians.	

ANTI-PLAGUE:

1 European Overseer	F. Drake, M.B.E.
2 Rat-catchers.	

BARRACKS MANAGEMENT:

1 European Caretaker	T. J. Espitalier.
14 Indians.	

CLEANSING SERVICE:

1 Chief Overseer	H. Lowe.
4 Assistant Overseers	
4 Sirdars and 106 Rubbish Collectors (Indian)	
5 Sirdars and 175 Street Cleaners (Indian).	

NIGHTSOIL REMOVAL:

1 Sirdar.
18 Indian Labourers.

PUBLIC CONVENIENCES:

10 European Attendants.
6 Indian Attendants.

CORPORATION CEMETERIES:

2 European Overseers	Stellawood, J. Bullough, General, L. Lowe
23 Indian Labourers,	

Health Department,
Municipal Buildings,
Durban.

November 30th 1925.

To His Worship the Mayor and
Town Councillors of the Borough of Durban.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit the Twentyfourth Annual Report dealing with the health and sanitary conditions of the Borough of Durban for the year ending 30th June, 1925.

POPULATION.

The following table shews the population for the year 1924-1925, as given by the Borough Census of November 1924, the previous Census of the Borough being shown in comparison:

	Govt. Census 1919	Govt. Census 1921	Estimate 1924	Municipal Census 1924
European	41,865	46,113	50,792	49,025
Coloured			4,471	1,838
Asiatic	19,872	18,391	16,150	16,417
Natives	17,925	29,011	35,000	27,861
TOTAL	79,662	93,515	106,413	95,241

AGE AND SEX DISTRIBUTION—EUROPEANS.

Ages	Male	Female	Total	Percentage at each age group to population	
				Durban	England and Wales 1924
Under 2 years	1,113	1,162	2,275	4.64	3.60
2 to 5 years	1,294	1,280	2,574	5.25	5.32
5 to 15 „	4,147	4,242	8,389	17.11	16.89
15 to 25 „	4,447	4,958	9,405	19.18	17.75
25 to 45 „	7,820	8,471	16,291	33.23	29.10
45 to 65 „	4,591	3,902	8,493	17,32	20.40
Over 65 years	781	817	1,598	3.26	6.40
TOTAL	24,193	24,832	49,025		

BIRTHS.

Nine hundred and seventy eight European births were registered, giving a birth-rate per 1,000 population of 19.95 as against 18.09 the previous year. The corresponding figure for England and Wales was 18.8 which, with the exception of the year 1919, constituted a record.

Amongst the Asiatic population, 655 births were registered, giving, a birth-rate of 39.76, a figure which, high though it is, is probably an understatement.

DEATHS.

A total of 1,177 deaths of Borough residents occured during the year—537 Europeans, 55 Coloured, 242 Natives and 341 Asiatics, an increase over the previous year in all races. The European Death rate corrected for non-residents was 10.95 as against 9.31 for 1923-24.

The following tables are set out for comparison and shew the percentage number of Deaths in Europeans at various age periods, the number of deaths from certain of the main causes, and the proportion per thousand deaths from all causes.

PERCENTAGE OF DEATHS AT VARIOUS AGE PERIODS— EUROPEANS.

Age Period	No. of Deaths	Percentage of total deaths at all ages	
		Durban	England Wales 1924.
Under 1 year	82	15.2	11.6
1—2 years	27	5.0	—
2—5 "	18	3.3	—
1—5 "	45	8.3	6.1
5—15 "	16	2.9	2.8
15—25 "	20	3.7	4.2
25—45 "	81	15.0	11.1
45—65 "	161	30.2	24.3
65—Over	132	24.5	39.9
TOTAL	537		

EUROPEANS.

Diseases.	No. of deaths.		deaths from all causes Proportion per 1,000		
			Durban		England and Wales
	1923/24	1924/25	1923/24	1924/25	1924
Infective Intestinal Disease (Enteric Fever, Dysentery, Diarrhoea and Enteritis).	66	75	139	139	17
Cancer	61	63	129	117	106
Heart and Circulatory System	58	64	122	119	168
Diseases of Nervous System	34	31	72	57	100
Diseases of Birth and Development	32	35	68	64	45
Pneumonia and Bronchitis	27	32	57	59	162
Pulmonary Tuberculosis	13	29	27	54	69
Other forms of Tuberculosis	11	4	23	7	18
Genito-urinary.	16	34	34	63	39

Below, the figures for Coloured, Natives and Asiatics for 1923-24 & 1924-25, are similarly classified:—

Diseases.	No. of Deaths.						Proportion per 1,000 deaths from all causes					
	Coloured		Native		Asiatic		Coloured		Native		Asiatic	
	1923/24	24/25	1923/4	1924/5	1923/4	24/25	1923/24	24/25	1923/4	1924/5	1923/4	24/25
Infective Intestinal Disease (Enteric Fever, Dysentery, Diarrhoea and Enteritis.		13	32	43	49	71		236	137	177	163	208
Cancer		0	6	0	4	3		0	26	0	13	9
Heart & Circulatory System		1	27	13	17	14		18	115	54	57	41
Diseases of Nervous System		3	9	11	12	25		54	38	45	40	73
Diseases of Birth and Development		8	8	7	50	34		145	209	198	167	99
Pneumonia and Bronchitis		8	49	48	56	65		145	209	198	187	190
Pulmonary Tuberculosis		3	15	37	11	37		54	64	153	36	109
Other forms of Tuberculosis		0	9	8	7	3		0	38	33	23	9

The above figures reveal a very definite increase in the deaths from two essentially preventable diseases, Infective Intestinal diseases and Pulmonary Tuberculosis. As regards the former, 202 deaths of Borough residents of all races occurred during the year, as against 152 last year, and the proportion per 1,000 deaths from all causes rose from 147 to 171. A heavy toll was exacted also upon the infant members of the community, 105 deaths from Diarrhoea and Enteritis in children under two years of age being registered, 41 being European, 7 Coloured, 11 Native and 46 Asiatic. The opinion expressed in last year's report that infected food is responsible, is again emphasised, and the figures can be said to reflect accurately the extremely unsatisfactory conditions under which foodstuffs and especially milk and meat, are handled at the present time. The legislation which is impending and the continued attention to the essential cleanliness of the town will prove to be important preventive factors, but efforts on these lines are unfortunately too frequently negatived by the lack of interest, carelessness or ignorance of the people they are intended to benefit. In a mixed community such as exists in and around Durban the "sanitary conscience" is slow to develop and sanitation in its widest meaning difficult to obtain.

Sixty three deaths from Cancer were registered amongst Borough European residents, approximately the same number as the previous year. Until very recently practically the only fact of general interest which had emerged from the enormous amount of work done on this subject was the paramount importance of early diagnosis and early operation, but the brilliant research work of Barnard an Gye published in 1925, opens up new avenues of hope and it may well be that Cancer will be added in the near future to the already long list of preventable diseases.

Low figures are maintained in Europeans for Respiratory Diseases, Diseases of the Heart and Circulatory System and Diseases of the Nervous System, whilst in the Non-European population Pneumonia and Bronchitis continue to be two of the chief causes of death. Diseases of Birth and Development again show unsatisfactory figures in all races.

Four hundred and fourteen deaths of non-residents occurred; 80 from Infective Intestinal Diseases of which 23 were Europeans and 47 Natives, 68 from Pulmonary Tuberculosis of which 9 were Europeans, 48 Natives and 8 Asiatics, and 52 from Pneumonia and Bronchitis, of which 34 were Natives.

EPIDEMIC AND INFECTIONS DISEASES.

Ten deaths occurred from Malaria but there was no evidence of undue prevalence. The anti-Malaria gang continued the routine in draining and spraying of collections of water with crude oil, 3,659 gallons being used for this purpose. It is proposed to give a trial to the method suggested by Major Mayne, R.A.M.C. who found that one ounce of cresol in 100,000 cubic feet of water (1 in 100 Million) will kill minute larvae almost immediately they leave the egg, and in a dilution ten times weaker will kill them in twenty four hours. In these dilutions the female mosquito is not deterred from laying her eggs and the water thus treated becomes a trap, and is harmless to man or beast.

Since the outbreak in the Native Compound at the Point, in November, 1923, no cases of TYPHUS FEVER in natives have been discovered in the Borough. The routine deverminising of all incoming Natives and the disinfection of their personal kit instituted in 1923 has been continued and over 30,000 Natives and 120,000 articles of kit have been dealt with during the 12 months. It would appear that such action is of definite preventive value and should be continued. The objections originally encountered on the so-called "dipping" have now quite dissappeared, and it is not uncommon for Natives to return voluntarily to the Disinfecting Station for further bathing and disinfection. In

Europeans, however, 15 cases were notified, all, with one exception, being single cases in a house. Since 1923, all specimens of blood sent to the Government Laboratory for examination for Enteric Fever have been tested at the same time for Typhus Fever, and it has been by this procedure, that most of the cases have been discovered. The circumstances of all cases have been thoroughly investigated, but in no instance could the source of infection be proved definitely. Typhus Fever is a disease which is regarded as being spread exclusively by means of infected lice, but the enquiries into the above European cases indicate that some modification of this teaching may have to be made in future.

No cases of PLAGUE were notified. The routine work of the anti-Plague section has continued and good progress made in the rat-proofing of buildings. During the year 5,879 inspections of property were made, and 335 notices were served upon occupiers of rat infested premises. In all 5,040 rats were definitely accounted for.

SMALL POX was again absent from the Borough although, as in previous years, cases frequently occurred in different parts of the Union. The prejudice against vaccination is still much in evidence, only 36% of registered births being vaccinated, and 51% of children of twelve years of age. The regular influx of Natives and others into the Borough is a constant danger, and the consequences of any chance introduction of infection into a community largely unprotected, cannot but be grave.

Seventy six cases of ENTERIC FEVER were notified, of which 44 were Europeans, 5 Coloured, 17 Natives and 10 Asiatic, and there were 21 deaths, giving a case mortality per cent of 11.3; 60; 58.8; and 33.3 in the respective races. These mortalities are excessively high for the non-Europeans, and indicate that cases are occurring which are not being notified, that medical and nursing attention is not being obtained in the earlier stages of the disease, or that this section of the community is very definitely less resistant to the infection than is the European.

The value and desirability of inoculation as a prophylactic measure must again be emphasised; it is unfortunate that it has again been impossible to obtain any further definite information with regard to the efficacy of administration of vaccine by mouth, except that at least it does no harm, and the indications are that it does protect, to a certain extent. It is, of course, a recent innovation, and time must be allowed before judging its value.

DIPHTHERIA caused 88 cases and three deaths amongst Borough residents, of which 83 were Europeans with two deaths, a case mortality per cent of 2.4, which is very satisfactory. In March a small outbreak occurred at the Berea Road Infant School and an extract from a report submitted to the Public Health Committee on April 14th follows:—

"On Wednesday, 18 March, it became evident that the cases already reported were probably due to a school infection, apparently limited to two classes at Berea Road Infants' School—I.A. & I.B. The School Authorities were notified and on Thursday I took swabs of all the available scholars in these two classes and closed the classes until further notice. On the 24th March another case was notified in a different class and the School Authorities were informed that it was advisable to regard all the school as contacts of the infection and that the whole school should be closed. This was done and instructions issued that no scholar was to attend any school until he or she could produce a certificate of freedom from infection. Swabbing is being carried out by myself and by various private Doctors and up to the date three carriers have been discovered and isolated. Although two of the cases died from very virulent attacks of diptheria the prevalence of the disease is very little above the average for this time of the year.

For the three months January to March the following cases have occurred during the last 5 years:—

1921	16
1922	19
1923	8
1924	8
1925	25

For the year 1919/20 81 cases were notified
„ „ „ 1920/21 61 „ „ „
„ „ „ 1921/22 66 „ „ „
„ „ „ 1922/23 50 „ „ „
„ „ „ 1923/24 60 „ „ „
and for the 9 months of 1925 37 cases were notified.

Since January 1925, 6 cases have occurred from the Berea Road Infants' School, the last one being on March 25 th. Bulwer Park School, Manning Road Private School, Greyville Infants', Epsom Road and Umgeni School have all had cases.

I have kept in touch with the Education Auhtorities in Durban and Maritzburg and reported to them as to the general conditions obtaining at the Berea Road Infants' School. The general impression appears to be that the defects which exist at the school have been directly responsible for the outbreak of diptheria. This is entirely wrong and instructions were given to the Education Department when the school was closed that as soon as sufficient scholars could produce evidence of fredom from infection to make it worth while to open the school, the school could be reopened. The education Authorities freely admit that the conditions at the school are not satisfactory but they have no alternative accommodation for the scholars.

At this time of the year diptheria is to be expected, so much so that special provision was made at the Infectious Disease Hospital some time before this outbreak occurred, and up to date there has been absolutely no cause for the extraordinary state of panic into which many people seem to get, chiefly due to the very ill-considered articles appearing in the local press, which certainly cause a great deal of unnecessary alarm and anxiety to the parents."

One result of the outbreak was to emphasise the great possibility of any necessary action in similar outbreaks falling between the two stools of the Provincial Administration and the Municipality. The latter's jurisdiction is restricted to the exclusion of individual scholars and the closing of schools or certain classes thereof, any further action devolving upon the School Medical service, whilst under Section 158 of the Public Health Act of 1919 the general inspection of school premises and conditions is not a function of the Municipal Health Department. In the report of the Union Hospital Enquiry Commission the transference of the School Medical Service to the State is advocated, but in my opinion more efficient working would be obtained by transferring such services to the Municipality where an organised Public Health Department is already in existence.

A very marked increase in PULMONARY TUBERCULOSIS has to be recorded, both in cases and deaths, over the previous year, European Borough deaths totalling 29 as against 13 in 1923-4, an increase of 123%; Native deaths 37 as against 15, an increase of 146%, and Asiatic deaths 37 as against 11, an increase of 236%. One hundred and forty four cases in all races were notified as against 75 in 1923-4. For the first few months of 1925-6 the figures appear to be declining in Europeans but maintaining their high level in Non-Europeans.

Experience of the cases coming under the direct observation of the Health Department indicated the necessity of provision of facilities for early diagnosis, many of the patients being far advanced in the disease when first presenting themselves for treatment.

The important functions an "After Care Committee" have been undertaken by the Red Cross Society and several cases have been dealt with up to date. Anti-tuberculosis work generally has been necessarily of a somewhat tentative nature for the past few years, but the appointment of an Assistant Medical Officer of Health as Tuberculosis Medical Officer, and of additional Health Visitors who will also act as Tuberculosis Nurses, together with the formation of the "Tuberculosis Care Committee" will allow of much needed development. Facilities for institutional treatment are not yet satisfactory, particularly for advanced cases.

There were three hundred and forty admissions to the INFECTIOUS DISEASES HOSPITAL, CONGELLA as against 281 in the previous year, comprising cases of Scarlet Fever, Diphtheria, Measles, Whooping Cough, Mumps, Typhus Fever, Enteric Fever, Chicken Pox, Erysipelas, Tuberculosis and Epidemic Cerebro-Spinal Meningitis. Additional accommodation is urgently required and it is regrettable that the pending report of the Hospital Enquiry Commission has made it necessary to postpone progress on the new hospital.

The courses of lectures to the Nurses have been continued and examinations have been held on the lines of the Fever Nurses Association Examination's, London, certificates being given to those Nurses showing satisfactory knowledge of the management and treatment of infectious diseases and their complications.

The work of the VENEREAL DISEASES CLINIC at Addington Hospital has continued, and 300 new patients reported during the year of which 211 were Europeans. A total of 3,794 attendances were made and 409 cases were treated as in-patients.

That much work still remains to be done with regard to CHILD WELFARE is evidenced by the continued high rate of Infant mortality, 82 deaths of infants under one year occurring, a mortality rate of 83.8 per 1,000 births as against 73.9 for the previous year. Of these, four-fifths were due to three causes, diseases of birth and development, (40,2%), gastro-intestinal diseases, (29.3%), and diseases of the respiratory system, (12.2%). A high infant mortality rate implies the loss of many future citizens and the maiming of many others, with a high death rate in the next few years of child life, and one of the chief factors conducing to such conditions is the ignorance of mothers generally, not only nthe case of the infant, but also in the care of themselves both before and after the child is born. The main object of a Maternity and Child Welfare detpartment is the spread of knowledge of all matters affecting infant and child life and it is satisfactory that the Medical Officer (Dr. K. McNeil) is able to report an increasing interest on the part of mothers and, what is more important, of expectant mothers. That the instruction and supervision of these mothers and infants is of definite value, is indicated by the fact that of the 720 infants under one year on the books of the Child Welfare department there were 21 deaths, giving a death rate per 1,000 of 29.1. In other words had this rate obtained for the town as a whole there would only have been 28 infant deaths instead of the 82 which actually occurred.

Whilst the existing conditions with regard to infant mortality are unsatisfactory, the position with regard to deaths of mothers in child birth or in relation thereto is infinitely worse, as the Borough has an unenviable maternal mortality rate in Europeans of 15.8 per 1,000 births. It is regrettable that no powers exist enabling the Health Department to exercise more efficient supervision over the midwifery service of the Borough, but is is hoped that the impending amendments to the Public Health Act will improve matters.

In January, 1925, a Municipal Midwife was appointed and during the six months ending in June attended 17 cases. There were no deaths in mother or child and no septic complications occurred. The midwife works in close co-operation with the ante-natal clinic of the Maternity and Child Welfare Department and in association with the training school for pupil midwives at Addington Hospital, whilst a roster of Medical men has been arranged for attendance in emergency cases.

The Chief Sanitary Inspector (Mr. R. Walker) reports that 50,598 visits of inspections were paid by the District Inspectors to premises within the Borough, 12,590 notices were issued and reports made, (including 3,519 reports on License applications,) 10,222 nuisances of various kinds were abated, and 267 instances of contravention of the Borough Bye-Laws in respect of Bakehouses and Food Factories dealt with.

Two hundred and seventy-two samples of food and drugs were taken during the year of which 234 were genuine. Twenty prosecutions under the Adulteration of Food Act and under Bye-Laws were instituted with 20 convictions, and 5 prosecutions under Section 113 of the Public Health Act for sale of unsound food, with 5 convictions. In addition, 194 samples of milk and 208 samples of water were submitted to the Government Laboratory for bacteriological examination and 208 samples of water to the Borough Analyst for chemical examination.

Two hundred and eight samples of new milk were taken for bacteriological examination. In 22 cases the bacterial content could not be estimated owing to the presence of spreading organisms. The table below gives the results, and although only 58% of the samples would conform to the requirements of the new milk Bye-laws, there has been a decided improvement over the previous year. The milk purveyors whose samples of milk prove to contain more than 200,000 organisms per cubic centimetre are sent a letter giving them the result of the examination and pointing out that such bad results indicate faulty handling of the milk at some stage between its production and delivery to the consumer. These communications, although quite unofficial, appear to be productive of good results.

36=20.9%	Samples	contained	less than	50,000	organisms per c.c.			
29=16.8%	„	„	over	50,000	and	less	than	100,000 c.c.
33=19.8%	„	„	„	100,000	„	„	„	200,000 „
18=10.4%	„	„	„	200,000	„	„	„	300,000 „
14= 8.1%	„	„	„	300,000	„	„	„	400,000 „
7= 4.0%	„	„	„	400,000	„	„	„	500,000 „
19=11.0%	„	„	„	500,000	„	„	„	1,000,000 „
6= 3.4%	„	„	„	1,000,000	„	„	„	2,000,000 „
10= 5.8%	„	„	„	2,000,000	to	over		6,000,000 „

Fifty-six samples were examined for the prensence of the Tubercle Bacillus and three or 5.3% were found to be positive, a figure indentical with the previous year. In these positive cases the milk supply to the Borough ceases at once and is not resumed until a certificate is received from a Veterinary Surgeon that the herd has been examined and all suspicious animals removed. The Government Veterinary Surgeon is also communicated with for necessary action under the Diseases of Stock Act and the Regulations thereunder.

The new Milk Bye-Laws have, it is hoped, reached their final stage and are awaiting promulgation by the Administrator. A good deal of opposition to their provisions has been met with particularly directed against the requirements that the cattle producing milk which is to be consumed raw shall be subjected to the tuberculin test, and that all milk supplied in quantities of less than two gallons shall be bottled. Knowing that between 50 and 60 per cent of cases of Non-Pulmonary Tuberculosis (i.e. tuberculosis of bones and joints, glands, abdominal tuberculosis, etc.) are due to milk and that of the Durban samples more than 1 in 20 are infected with the Tubercle Bacillus, and bearing in mind that at least 1 in 10 of the samples are contaminated to an extent that compares unfavourably with average town sewage, objections to requirements designed to at least ameliorate such conditions, can hardly be defended except on strictly economic grounds. It may be mentioned also that such requirements are practically universal in all up to date towns. The delay in the passing of these Bye-laws is to be regretted, especially as they will not come into force until further six months has elapsed after promulgation by the Administrator.

Bye-laws for the protection of food supplies are also under consideration, and some improvement in the methods of handling perishable foodstuffs is urgently required. In this connection reference must be made to what is considered to be the high price of ice within the Borough, which renders anything like a plentiful supply prohibitive to the poorer sections of the community. Powers sought by the Municipality which would have enabled them to make and sell ice at a cheaper rate than obtains at present, were unfortunately refused, as any means by which this essential commodity can be made more accessible to all classes of the population would be welcomed.

Routine chemical examinations of the WATER SUPPLY are carried out weekly and the following gives a fair average of the results obtained throughout the year. Bacteriological and chemical tests are also done regularly to check the working efficiency of the filter beds and chlorinating plant.

Colour	Good	Good	Good	Good
Sediment	Nil	Nil	Nil	Nil
Turbidity	Nil	Nil	Nil	Nil
Reaction	1.28 Alk.	1.38 Alk.	1.16 Alk.	1.18 Alk.

ANALYSIS.

(Results expressed in parts per 100,000.)

Total Solids	14.00	13.68	14.20	13.68
Loss on Ignition	2.60	2.25	3.00	2.24
Chlorine	3.90	3.20	3.37	3.55
Nitrates and Nitrites	Nil	Nil	Nil	Nil
Saline Ammonia	.002	.002	.002	.002
Albuminoid Ammonia	.009	.010	.009	.008
Total Hardness	6.14	6.57	6.14	6.29
Permanent Hardness	3.25	3.77	3.64	2.86
Iron	Trace	Trace	Trace	Trace
Poisonous Metals	Nil	Nil	Nil	Nil

By courtesy of the Abattoir Director (Major W. G. Barnes, M.R.C.V.S.) a table is submitted separately showing the number of Carcasses condemned for different diseases, at the Municipal Abattoir.

HOUSING.

During the year 507 new dwelling houses have been erected of which 40 were built by the Corporation. From the Borough census taken in November, 1924 it appears that there are some 1,100 houses occupied by more than one family; that 13% of houses are rented at under £5 a month, 27% at between £5 and £7 10s. 0d. a month and 26% at between £7 10s. 0d. and £10. Although there has been definite improvement in the housing position generally, in respect of the lower paid workers the improvement has been slight, and there appears to be a distinct need for small houses which could be let at a rental of £4 to £5 a month. The present system under which the Corporation builds houses to let at a purchasing rental of about £8 a month will not, in my opinion, meet the need. Cheaper houses are required and it does not appear that it will be possible to provide these within the Borough on the lines at present advocated, i.e. detached self-contained houses with garden, and to let them at an economic rental within the means of the poorer classes of the community. It is interesting to compare the conditions with those obtaining in many towns of England—the high cost of land within the Borough renders so called working class dwellings of the detached garden-city type impracticable, the alternatives being the erection of blocks of flats or tenements housing numerous families on a small area of ground, or going further afield where land is cheaper and allows of the detached dwelling being built to let at an economic rent within the means of the more humble purse. The latter is far preferable but implies provision of easy transport facilities for the workers. The rapid growth of Durban is bringing these problems nearer every day, as is evidenced by the increasing numbers of blocks of flats put up within the Borough during the past year.

Since the beginning of 1924 all plans for new buildings and for alterations to existing ones have been submitted to this Department for examination, and experience of these plans indicates that the importance of free ventilation does not appear to be appreciated in many instances.

Until recently the essential requirement for efficient ventilation was held to be the replacement of the socalled vitiated air by pure fresh air at the rate of 3,000 cubic feet per person per hour in order to maintain the Carbonic Acid content at the concentration of not more than .06% which was regarded as the limit of respiratory impurity. Recent work, however, particularly that of Leonard Hill (Report No. 52, Medical Research Council, "Science of Ventilation") has shown that the main factor is not the chemical composition of the air, but its cooling power upon the human body, and that provided that this power is maintained air containing up to 1.2% of CO2 can be breathed without any ill effects. The enervating effects of a hot, moist, stagnant atmosphere is well known, and the work referred to above amply confirms by scientific experiment, the vast difference between the physical well being and efficiency which obtain under such conditions and where the air is cool, dry, and in constant movement—"enervating" and "depressing" in the former case, and "bracing" in the latter, express in ordinary terms the result of deficient and efficient cooling power of the atmosphere.

The cooling power depends chiefly upon the temperature, the humidity and the movement of the atmosphere, and can be measured by means of the Kata-thermometer. The atmospheric conditions usually as "healthy" are a temperature of 60° Fahrenheit and a relative humidity of 45—60%, the comfort of such conditions fluctuating up or down according to whether there is free air movement or not.

The following figures for Durban are of interest:—
The mean minimum temperature over the whole year is 61.7% Fahrenheit; the mean maximum temperature is 79.8% F. and the average 70.8% F. During the six summer months from November to April, the mean minimum temperature is 66.5% F. and the mean maximum temperature is 83.4% F., whilst the relative humidity is over 70% for nine months of the year, being approximately 74% for the six summer months.

Compare Bloemfontein where the relative humidity for five months of the year averages 60% and for a further six months is between 40% and 50%.

The above figures indicate that the general conditions of Durban require some modifying influence, and this is fortunately supplied by the fairly constant breezes with which the town is favoured. The effect, however, of a succession of hot windless days, followed by still and cloudy nights on the energy and temper of the community, is within everyone's experience—"Natal Fever," an attack of which every newcomer is lead to expect sooner or later, is no empty term. Kata-thermometer observations bear out the same point, and I am indebted to Dr. Park Ross, Assistant Health Officer for the Union, for certain figures obtained in Durban during the summer of 1922. Dr. Leonard Hill has defined as a minimum standard of comfort for sedentary workers, a "dry Kata" figure of 6, and a "wet Kata" figure of 18, with higher figures for occupations involving physical labour.

To show the optimum outdoor conditions of Durban, readings were taken at 11 a.m. on series of 37 days in February and March 1922 in an open space four feet above grass under shady trees and half way up the Berea, well away from a broad road or other sources of warm dust. Similar conditions are unobtainable in the business and factory area, and these figures are intended to represent the best conditions obtainable.

Outdoor Berea.	Dry Kata	Wet Kata	Relative Humidity.
Average 37 days	7	22.8	71%
Average worst ten days	5.5	20.6	87%

Two school rooms were examined, one "A" with cross ventilation maintained by means of austral windows, and "B" with means of cross ventilation provided, but not used owing to high wind.

	Dry Kata	Wet Kata	Relative Humidity
Outside in shade	6.9	17.5	82%
School Room "A"	5.3	17.5	85%
School Room "B"	2.1	11.0	87%

	Dry Kata	Wet Kata	Relative Humidity
Large business premises steel and brick, through ventilation, 16 windows on both sides half open. No fans	3.0	13.0	83%
A bad Durban Office No fans. 20 Clerks	2.6	12.5	77%

The above figures are sufficient to indicate the difficulty in attaining a reasonable standard of comfort even when means of through ventilation are proved, whilst without such provision the conditions can become literally unbearable, even for sedentary work.

Defective ventilation, implying the lack of free air movement has definite effects on both health and working efficiency. Numerous experiments have shown that the metabolism of the human body is definitely decreased under conditions below the standard stated, viz., a dry Kata of 6, and a wet Kata of 18, with a corresponding reduction in physical and mental vigour. Such conditions long continued lead to a general lowering of resistance to disease and a predisposition to tuberculosis, catarrhal conditions, and in children, to rickets. The loss in working efficiency in insufficiently ventilated atmospheres has been shown to vary between 12% and 20%. Orenstein and Ireland in 1922 compared the cooling power of the atmosphere and the working efficiency of men in 36 different positions in a Rand mine, and concluded that the total loss of efficiency through deficit cooling power was 21%, necessitating the employment of 282 natives instead of 215 who would have been necessary had the ventilating system been efficient. The working efficiency under conditions found in school room "B," would be 60%, that in the "large business premises", 72% and that in "a bad Durban office", 66%. This is obviously of great importance from the economic standpoint.

Other points to which the attention of the Committee on Building plans has been drawn are:—

(1) Water closets opening direct into living or bedrooms or into an unventilated or insufficiently ventilated passage.

(2) Water closets so situated that the only means of access is through a living room or kitchen, or both.

(3) The only water closet in a house being situated in the bath room.

(4) The necessity for an efficiently ventilated pantry or food store.

(5) The absence of facilities for washing clothes in connection with the ordinary dwelling house.

(6) The lighting and ventilation of native quarters.

(7) The overwhelming predilection in favour of the bungalow type of house as against the double storey type even where native servants are kept.

(8) The advisability of amending certain of the Building Bye-laws and the drafting of others to deal with dwellings occupied by more than one family.

GENERAL.

Attention must again be drawn to the necessity for detaching from the Sanitary Department the executive management of refuse disposal, street cleaning services, night soil removal, public conveniences, cemeteries, and barracks. As there appeared to be a general impression that the refuse, scavanging and conservancy services were usually carried out by Health Departments in other towns, a circular letter was addressed to thirty-one Municipalities in South Africa, England, Wales, and Scotland. Of the five chief South African towns, in only one does the control of these services come under the Health Department, and of the 26 towns overseas in all but four the control devolves either upon an independent Cleansing Officer or upon the Borough Engineer. In my first report upon reorganisation, it was stressed that the above services were certainly not a function of a Department whose essential duty is sanitary supervision and education, and that opinion is still held.

I would again like to express my appreciation of the loyal service of each member of the staff of the Department and my thanks to you, Sir, to the members of Council and of the Public Health Committee in particular for the continued kindness and courtesy which have been extended to me.

I have the honour to be,

Mr. Mayor, ladies and gentlemen,

Your obedient servant,

S. J. CLEGG, M.D., D.P.H.

Medical Officer of Health.

EUROPEANS—BOROUGH.

Year ending	Population.	Birth Rate.	Death Rate.	Infantile Mortality.	Zymotic Death Rate.	DIARRHOEA. (All Ages.)		SMALLPOX.				
						No. of Deaths	Death Rate per 1,000 of Population.	Cases Notified.	No. of Deaths	Case Mortality per cent.	Death Rate per 1,000 of population	Attack Rate per 1,000 of population.
30th June, 1924	50,792	18.09	9.31	73.99	1.397	40	.789	—	—	—	—	—
30 June 1925.	49,025	19.95	10.95	83.844	1.693	47	.958	—	—	—	......	—

Year ending	ENTERIC FEVER.					DIPHTHERIA.					SCARLET FEVER.					MEASLES.		WHOOPING COUGH.	
	Cases Notified	No. of Deaths.	Case Mortality per cent.	Death Rate per 1,000 of population.	Attack Rate 1,000 of population.	Cases Notified	No. of Deaths.	Case Mortality per cent.	Death Rate per 1,000 of population.	Attack Rate 1,000 of population.	Cases Notified	No. of Deaths.	Case Mortality per cent.	Death Rate per 1,000 of population.	Attack Rate 1,000 of population.	No. of Deaths.	Death Rate per 1,000 of population.	No. of Deaths	Death Rate per 1,000 of population.
30th June, 1924	37	9	24.3	.17	.72	60	3	5.0	.059	1.18	22	1	4.54	.0196	.43	1	.0196	1	.0196
30 June 1925.	44	5	11.3	.101	89	83	2	2.4	.040	1.69	18	—	—	—	36	3	0.611	2	.040

Year ending	PUERPERAL SEPSIS			CANCER.		PULMONARY TUBERCULOSIS				TUBERCULOSIS: OTHER FORMS			
	Cases Notified	No. of Deaths	Death Rate per 1,000 of population.	No. of Deaths	Death Rate per 1,000 of population.	New Cases Notified.	No of Deaths.	Death Rate per 1,000 of Population.	Attack Rate per 1,000 of Population.	New Cases Notified.	No. of Deaths.	Death Rate per 1,000 of Population.	Attack Rate per 1,000 of Population.
30th June, 1924	4	—	—	61	1.201	53	13	.255	.452	13	11	.216	.255
30 June 1925.	5	5	.101	63	1.285	42	25	.591	.856	11	8	.157	.224

Year ending	TOTAL TUBERCULOSIS.				TYPHUS.				DYSENTERY.		MALARIA.	
	New Cases Notified.	No. of Deaths.	Death Rate per 1,000 of Population.	Attack Rate per 1,000 of Population.	New Cases Notified.	No. of Deaths.	Death Rate per 1,000 of Population.	Attack Rate per 1,000 of Population.	No. of Deaths.	Death Rate per 1,000 of Population.	No of Deaths	No. of Deaths. Death Rate per 1,000 of population.
30th June, 1924	36	24	.472	.707	5	—	—	.098	17	.3346	11	.2165
30 June 1925.	53	33	.673	1.080	15	1	.02	.305	23	.469	5	.101

ZYMOTIC DEATHS.

Diarrhoea	47
Enteric	5
Diptheria	2
Measles	3
Whooping Cough	2
Scarlet Fever	0
Typhus	1
Dysentery	23
	83

BIRTHS.

Table showing the Monthly Distribution of Births occurring among **Borough Residents**, giving **Race** and Sex 1924-25.

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1924										
July	35	42	2	4	3	2	30	23	70	71
August	39	35	2	3	0	5	13	4	54	47
September	45	48	2	0	4	5	37	33	88	86
October	39	31	3	4	1	2	37	29	80	86
November	38	39	3	2	1	2	42	31	84	74
December	42	34	5	3	1	1	23	27	71	65
1925										
January	39	39	4	4	0	1	33	36	76	80
February	32	31	4	3	2	2	18	20	56	56
March	46	46	2	4	0	1	21	25	69	76
April	49	45	5	7	1	3	32	32	87	87
May	45	25	5	5	0	2	25	27	75	59
June	61	53	3	5	0	1	35	22	99	81
TOTALS	510	468	40	44	13	27	346	309	909	848

Table showing Monthly Distribution of Births occurring among **Non-Residents**, giving **Race** and Sex, 1924-25:—

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1924										
July	20	10	—	—	7	5	1	2	28	17
August	9	11	—	—	5	6	1	1	15	18
September	23	13	—	—	9	10	—	1	32	24
October	8	15	—	—	3	12	2	—	13	27
November	12	6	1	1	6	3	—	1	19	11
December	12	10	—	—	6	9	—	1	18	20
1925										
January	8	6	—	1	13	11	3	—	24	18
February	18	14	2	2	14	10	1	1	35	27
March	14	10	—	1	14	10	2	1	30	22
April	11	9	1	3	18	20	—	—	30	32
May	13	16	2	2	9	8	1	1	25	27
June	9	17	—	2	15	12	1	—	25	31
TOTALS	157	137	6	12	119	116	12	9	294	274

European Birth Rate (gross)	25.94
European Birth Rate (corrected for non-residents)	19.95
Coloured Birth Rate (corrected for non-residents)	45.70
Native Birth Rate (corrected for non-residents)	1.43
Asiatic Birth Rate (corrected for non-residents)	39.76
Birth Rate, England and Wales, 1924	18.80

TABLE SHOWING TOTAL REGISTERED EUROPEAN BIRTHS AND BIRTH RATES FOR THE PAST SEVEN YEARS.

	1919	1920	1921	1922	1923	1924	1925 Gross	1925 Boro. only
Births	1,128	1,252	1,338	1,350	1,301	1,139	1,272	978
Rates	23.8	24.9	26.6	26.8	23.7	22.4	25.94	19.95

TABLE SHOWING ILLEGITIMATE BIRTHS OCCURRING AMONG BOROUGH RESIDENTS, 1924-25.

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Births	17	18	16	12	6	9	—	—	39	39
Percentages	3.58		33.33		37.5		—			

INFANTILE MORTALITY—AGES AND CAUSES OF DEATHS.

	Weeks.			Months			Total Under 1 year
	0–1	1–2	2–4	1–3	3–6	6-12	
Whooping Cough	—	—	—	—	1	—	1
Measles	—	—	—	—	—	2	2
Malaria	—	—	—	—	—	1	1
Dysentery	—	—	—	—	1	3	4
Enteritis	—	—	—	1	5	13	19
Gastritis	—	—	1	—	—	—	1
Prematurity	13	1	1	3	—	—	18
Marasmus, Debility,	2	—	—	7	2	2	13
Congenital Syphilis	1	—	—	1	—	—	2
Broncho-Pneumonia	—	—	—	—	1	6	7
Anaemia	—	—	—	—	—	1	1
Bronchitis	—	—	—	—	—	3	3
Colitis	—	—	—	—	1	—	1
Convulsions	1	—	—	—	—	1	2
Hydrocephalus	—	—	—	1	—	1	2
Haemorrhage	1	1	1	—	—	—	3
Haemorrhagic Diseases	—	—	—	—	—	1	1
Accidental Suffocation	—	—	1	—	—	—	1
Totals	18	2	4	13	11	34	82

EUROPEAN INFANTILE MORTALITY.

	Male	Female	Total
Infantile Deaths during 1924-1925	47	35	82
Registered Births	510	468	978

This equals 83.844 infantile deaths per 1,000 births and represents the **"Infantile Mortality Figure"** for Durban.

The following table shows the Infantile Mortality Figure for England and Wales during 1924:—

England and Wales	75
705 Great Towns, including London	80
157 Smaller Towns	71
London	69

INFANTILE DEATHS IN WARDS FOR THE PAST FIVE YEARS.

Wards	1	2	3	4	5	6	7	8	9	Total
1920-21	10	6	6	12	3	13	—	3	7	60
1921-22	18	17	6	9	6	10	4	8	11	89
1922-23	6	9	3	8	5	12	6	4	11	64
1923-24	14	6	7	5	5	16	5	3	7	68
1924-25	11	16	3	11	9	10	11	5	6	82

INFANT MORTALITY RATE FOR PAST SIX YEARS.

	1919–20	1920–21	1921–22	1922–23	1923–24	1924-25
Infant Deaths	97	60	89	64	68	82
Mortality Figure	90.4	54.2	77.8	58.34	73.99	83.844

DEATHS.

BOROUGH DEATHS, EUROPEAN AND COLOURED—AGE AND SEX DISTRIBUTION.

	European		Coloured		Total	
	M.	F.	M.	F.	M.	F.
Under 1 year	47	35	7	12	54	47
1— 2 years	13	14	1	2	14	16
2— 5 years	9	9	2	1	11	10
5—15 years	8	8	2	1	10	9
15—25 years	8	12	1	—	9	12
25—45 years	43	38	4	5	47	43
45—65 years	108	53	6	2	114	55
65 and over	71	61	5	4	76	65
Totals:	307	230	28	27	335	257

IMPORTED DEATHS: EUROPEAN AND COLOURED: AGE AND SEX DISTRIBUTION.

	European M.	European F.	Coloured M.	Coloured F.	Total M.	Total F.
Under 1 year	16	8	3	—	19	8
1— 2 years	5	2	1	—	6	2
2— 5 years	2	—	—	—	2	—
5—15 years	5	2	—	—	5	2
15—25 years	11	3	2	1	13	4
25—45 years	23	8	1	3	24	11
45—65 years	36	13	2	—	38	13
65 and over	17	5	—	—	17	5
Totals	115	41	9	4	124	45

TABLE SHOWING CHIEF STATISTICS OF DEATHS OF ALL RACES IN THE BOROUGH DURING THE PAST FIVE YEARS.

Race	1920–21	1921–22	1922–23	1923–24	1924–25
European ...... }	449	276	450	473	537
Coloured ...... }				23	55
Native	172	198	133	234	242
Asiatic	329	306	288	300	341
	950	780	871	1,030	1,175

DEATH RATE PER 1,000 OF POPULATION:—

Race	1920–21	1921–22	1922–23	1923–24	1924–25
European ...... }	8.9	9.4	8.2	9.31	10.95
Coloured ...... }				5.14	29.92
Native	5.6	6.8	3.9	6.68	8.65
Asiatic	23.16	20.19	18.4	18.57	20.77

TABLE FOR COMPARISON SHOWING RECORDED DEATH RATE IN ENGLAND AND WALES IN 1924.

England and Wales	12.2
105 Great Towns including London	12.3
157 Smaller Towns	11.2
London	12.0

TABLE OF ALL DEATHS IN INSTITUTIONS AND NURSING HOMES.

	European		Coloured		Natives		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Addington Hospital	170	62	16	10	232	50	49	16	467	138
Gaol Hospital	—	—	—	—	3	—	—	—	3	—
Sanatorium	22	17	—	—	—	—	—	—	22	17
Indian Depot Hospital	—	—	—	—	4	—	7	3	11	3
S.A.R. Hospital	—	—	—	—	13	—	4	4	17	4
Musgrave Nursing Hme.	35	17	—	1	—	—	—	—	35	18
Corporation Hospital	3	4	—	—	2	—	1	—	6	4
Private Hospitals	11	14	2	1	8	8	3	1	24	24
Totals	241	114	18	12	262	58	64	24	585	208

DEATHS.

1. Table showing monthly distribution of deaths of all races, among **Borough Residents.**

	European		Coloured		Natives		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1924.										
July, ...	24	17	2	1	13	2	16	13	55	33
August, ...	26	25	—	3	23	1	11	10	60	39
September, ...	26	23	2	3	18	3	17	5	63	34
October, ...	31	21	—	1	16	3	16	8	63	33
November, ...	37	21	6	3	34	2	18	20	95	46
December	30	22	2	4	19	5	30	15	81	46
1925.										
January, ...	28	11	4	2	22	4	15	18	69	35
February, ...	9	22	5	1	13	—	17	10	44	33
March, ...	21	13	1	3	10	2	15	15	47	33
April, ...	24	17	—	2	11	—	5	24	40	43
May, ...	25	19	—	1	18	2	12	10	55	32
June, ...	26	19	6	3	17	4	13	8	62	34
Totals:	307	230	28	27	214	28	185	156	734	441

2. Table showing monthly distribution of deaths of all Races, among **Non-Residents.**

	European		Coloured		Natives		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1924.										
July, ...	10	6	—	—	14	2	5	—	29	8
August, ...	9	4	1	—	11	3	2	—	23	7
September, ...	12	1	—	1	10	8	2	—	24	10
October, ...	10	3	1	—	26	2	11	—	48	5
November, ...	10	4	—	—	11	3	5	—	26	7
December, ...	8	6	1	1	7	4	3	2	19	13
1925.										
January, ...	9	1	5	—	18	4	3	1	35	6
February, ...	9	1	—	—	9	3	2	—	20	4
March, ...	11	4	1	—	7	4	4	3	23	11
April, ...	10	6	—	2	11	3	2	—	23	11
May, ...	9	2	—	—	11	6	5	2	25	10
June, ...	8	3	—	—	9	7	2	1	19	11
	115	41	9	4	144	49	46	9	314	103

All Causes of Deaths for all Races occurring in the Borough for the Year ending 30th June, 1925.

	Europeans	Coloured	Native	Asiatic	Total
EPIDEMIC AND INFECTIOUS DISEASES					
Enteric Fever	5	3	10	3	21
Typhus Fever	1	0	1	0	2
Malarial Fever	5	0	1	4	10
Measles	3	0	0	0	3
Whooping Cough	2	0	1	0	3
Diphtheria	2	0	0	1	3
Influenza	7	0	4	6	17
Dysentery:					
i Amoebic	3	0	0	0	3
ii Bacillary	12	0	5	1	18
iii Other Causes	8	1	17	13	39
Acute Poliomyelitis	0	0	0	1	1
Encephalitis Lethargica	1	0	0	0	1
Meningitis	3	0	0	0	3
Tetanus	1	0	2	1	4
Tuberculosis of the Respiratory Syst.	29	3	37	37	106
Tuberculosis of the Central Nerv. Syst.	0	0	1	1	2
Tuberculosis of the Intestines	0	0	1	1	2
Tuberculosis of the Other Organs	0	0	1	0	1
Disseminated Tuberculosis	4	0	5	1	10
Syphilis	0	0	2	0	2

	Europeans	Coloured	Native	Asiatic	Total
Syphilis (Hereditary)	1	1	2	1	5
Purulent infection Septicaemia	2	0	0	2	4
GENERAL DISEASES NOT INCLUDED ABOVE					
Malignant Tumours of the Buccal Cavity	5	0	0	0	5
Malignant Tumours of the Stomach liver	21	0	0	1	22
Malignant Tumours of the Peritoneum	10	0	0	0	10
Malignant Tumour of Female genital organs	8	0	0	0	8
Malignant Tumours of the Breast	5	0	0	0	5
Malignant Tumours of the Skin	2	0	0	0	2
Malignant Tumours of other organs	12	0	0	2	14
Benign Tumours	3	0	0	0	3
Rheumatic Fever	0	1	1	0	2
Chronic Rheumatism, Gout	1	0	0	0	1
Scurvy	0	0	2	0	2
Rickets	0	0	1	0	1
Diabetes	6	0	0	5	11
Anaemia Chlorosis	3	0	0	0	3
Anaemia Pernicious	2	0	0	0	2
Diseases of the Thyroid Glands	1	0	0	0	1
Leukaemia lymphadenoma	2	0	0	0	2
Alcoholism (Acute or Chronic)	1	1	0	0	2
Other General Diseases	0	0	1	1	2
DISEASES OF THE NERVOUS SYSTEM					
Meningitis	7	0	5	3	15
Other Diseases of the Spinal Cord	3	0	0	2	5
Cerebral Haemorrhage Apoplexy	12	2	4	6	24
Cerebral Haemorrhage	0	0	0	1	1
Paralysis of unstated Origin	4	0	0	1	5
Other Forms of Mental Alienation	0	1	1	0	2
Epilepsy	3	0	0	2	5
Infantile Convulsions	1	0	1	8	10
Cerebral Softening	1	0	0	0	1

	Europeans	Coloured	Native	Asiatic	Total
Other Diseases of the Nervous System	1	0	0	2	3
Diseases of the Ear & Mastoid Sinus	2	1	1	0	4
DISEASES OF THE CIRCULATORY SYSTEM.					
Pericarditis	0	0	2	1	3
Acute Endocarditis & Myocarditis	32	0	6	5	43
Angina Pectoris	4	0	0	0	4
Other Diseases of the Heart	15	0	5	8	28
Diseases of the Arteries	5	0	0	0	5
Arterial Sclerosis	6	1	0	0	7
Diseases of the Veins	1	0	0	0	1
Haemorrhage without determined cause	1	0	1	0	2
DISEASES OF THE RESPIRATORY SYSTEM.					
Bronchitis	4	0	1	14	19
Acute Bronchitis	3	1	3	10	17
Chronic Bronchitis	3	1	1	1	6
Bronchitis not otherwise defined (under 5 years)	0	0	0	1	1
Broncho Pneumonia	9	4	11	34	58
Pneumonia	9	0	13	4	26
Lobar Pneumonia	4	2	19	1	26
Pleurisy	3	1	1	2	7
Asthma	4	0	1	1	6
Other Diseases of the Respiratory System	2	1	3	0	6
DISEASE OF THE DIGESTIVE SYSTEM.					
Diseases of the Pharynx and Tonsils	0	0	0	1	1
Diseases of the Stomach & Duodenum	1	0	0	0	1
Diarrhoea & Enteritis under 2 years	39	7	11	46	103
Diarrhoea & Entiritis, over 2 years	6	2	0	8	16
Appendicitis & Typhlitis	3	0	0	0	3
Hernia and Intestinal Obstruction	4	0	2	1	7

	Europeans	Coloured	Native	Asiatic	Total
Other Diseases of the Intestine	2	0	1	0	3
Cirrhosis of the liver	8	0	1	3	12
Biliary Calculi	2	0	1	0	3
Other Diseases of the liver	5	0	2	1	8
Peritonitis of unstated origin	1	1	1	1	4
NON VENEREAL DISEASES OF THE GENITO-URINARY SYSTEM.					
Acute Nephritis	4	1	2	1	8
Chronic Nephritis	20	1	3	5	29
Other diseases of the Kidneys	2	0	2	1	5
Diseases of the Bladder	2	0	0	0	2
Diseases of the Urethra, Urinary Abscess	2	0	0	1	3
Diseases of the Prostate	3	0	0	0	3
Salpingitis and Pelvic Abscess	1	0	0	0	1
THE PUERPERAL STATE.					
Normal Childbirth	1	0	0	0	1
Accidents of Pregnancy	5	0	0	1	6
Puerperal Haemorrhage	0	0	0	2	2
Other accidents of Childbirth	1	0	0	0	1
Puerperal Sepsis	5	0	1	0	6
Puerperal Albuminuria and Convulsions	1	1	0	1	3
Childbirth	2	0	0	1	3
Puerperal Diseases of the Breast	0	1	0	0	1
DISEASES OF THE SKIN & CELLULAR TISSUE.					
Gangrene	0	0	1	0	1
Phlegmon acute abscess	0	0	2	0	2
Other Diseases of the Skin	1	0	0	0	1
DISEASES OF THE BONES AND ORGANS of LOCOMOTION.					
Diseases of the Bones	0	0	0	1	1

	Europeans	Coloured	Native	Asiatic	Total
MALFORMATIONS					
Congenital Malformations	2	0	0	0	2
DISEASES OF EARLY INFANCY					
Congenital Debility, icterus and scleroma	10	2	1	18	31
Premature birth. Injury at Birth	19	5	6	13	43
Other causes peculiar to early infancy	6	1	0	3	10
OLD AGE					
Senility	33	4	2	10	49
EXTERNAL CAUSES.					
Suicide by solid or liquid poisons	4	0	0	0	4
Suicide by firearms	2	1	0	0	3
Suicide by drowning	2	0	0	0	2
Suicide by cutting or piercing instrument	1	1	0	1	3
Suicide by hanging or strangulation	1	0	1	0	2
Burns	1	1	2	8	12
Accidental mechanical suffocation	1	0	0	0	1
Accidental injury in mines and quarries	0	0	2	0	2
Accidental injury by fall	11	0	4	4	19
Accidental injury by other forms (railways), etc.)	5	0	3	4	12
Hunger or thirst	1	0	0	0	1
Accidental drowning	5	1	2	0	8
Electricity	0	0	1	0	1
Poisoning by Food	1	0	0	0	1
Other acute accidental poisonings	1	0	0	0	1
ILL DEFINED DISEASES					
Sudden Deaths	0	0	14	16	30
Totals	537	55	242	341	1,175

NON RESIDENT DEATHS—ALL RACES.

Arranged according to certain Diseases.

	Europeans	Coloured	Native	Asiatic	Total
INFECTIOUS DISEASES:					
Diphtheria	1	—	—	—	1
Dysentery	10	—	33	4	47
Tetanus	1	—	2	—	3
Pulmonary Tuberculosis	9	3	48	8	68
Non-Pulmonary ...... Tuberculosis	3	1	6	4	14
Syphilis	1	—	3	—	4
Enteric Fever	4	1	8	2	15
Malaria Fever	2	—	2	2	6
Septicaemia	—	—	1	2	3
Influenza	5	—	—	—	5
Measles	1	—	—	—	1
Whooping Cough	1	—	—	—	1
Cerebro-Spinal-Meningitis	—	—	—	1	1
GENERAL DISEASES:					
Cancer	19	—	3	4	26
Diabetes	1	—	—	—	1
Scurvy	—	—	1	—	1
Pellagra	1	—	—	—	1
Other General Diseases	—	—	—	1	1
DISEASES OF NERVOUS SYSTEM	13	1	5	1	20
DISEASES OF CIRCULATORY SYSTEM:					
Endocarditis, Myocarditis	7	—	7	2	16
Other diseases of the heart	9	—	3	3	15
DISEASES OF RESPIRATORY SYSTEM:					
Bronchitis	1	—	3	4	8
Broncho-Pneumonia	4	2	11	1	18
Pneumonia	2	1	20	3	26
Pleurisy	1	—	2	—	3
Other diseases	—	—	1	1	2
DISEASES OF THE DIGESTIVE SYSTEM					
Diarrhoea, Enteritis	11	2	6	1	20
Other diseases of digestive system	19	—	4	1	24

	Europeans	Coloured	Native	Asiatic	Total
NON VENEREAL DISEASES OF URINARY: SYSTEM					
Nephritis	3	—	1	1	5
Other diseases of the urinary system	4	1	—	1	6
THE PUERPERAL STATE	—	—	4	1	5
DISEASES OF EARLY INFANCY					
Congenital debility	3	—	5	—	8
Premature Birth	2	1	4	—	7
DISEASES OF THE SKIN:	2	—	1	—	3
DISEASES OF THE BONES	—	—	—	1	1
OLD AGE	5	—	—	3	8
EXTERNAL CAUSES					
Suicides	1	—	1	—	2
Accidents	9	—	—	1	10
Accidental poisonings	1	—	—	—	1
ILL DEFINED	—	—	8	1	9
TOTALS	156	13	193	54	416

The following table shows the Comparative Rates (Europeans, not including Coloured,) from the principal towns of South Africa:—

Town	Population.	Birth Rate	Death Rate	Infantile Mortality	Tuberculosis Death Rate
Pretoria	60.200	23.71	7.44	60.09	—
Johannesburg		24.49	9.8	78.55	0.2
Cape Town		20.09	9.58	71.94	0.81
Bloemfontein	17,711	22.6	13.4	85.9	—
Maritzburg	19,122	28.03	10.30	65.29	.52
East London					
Port Elizabeth	26.245	28.2	13.0	106.55	—
Durban	95.241	19.95	10.95	38.844	.673

TABLE OF CASES OF NOTIFIABLE INFECTIOUS DISEASES, ARRANGED ACCORDING TO RACES, 1924-1925.

Diseases.	European		Coloured		Natives		Asiatic		Total	
	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.
Diphtheria	83	14	2	—	1	1	2	—	88	15
Scarlet Fever	18	1	—	—	—	—	—	—	18	1
Enteric Fever	44	41	5	1	17	26	10	4	76	72
Pulmonary Tuberculosis	42	20	8	8	58	53	36	29	144	110
Non-Pulmonary Tuberculosis	11	6	2	—	17	16	8	10	38	32
Puerperal Fever	3	—	—	—	1	3	1	—	5	3
Cerebro Spinal Meningitis	3	—	1	—	1	1	2	2	7	3
Leprosy	—	—	—	—	—	2	—	—	—	2
Erysipelas	2	—	—	—	—	—	1	—	3	—
Typhus Fever	15	4	—	—	—	—	—	—	19	—
Acute Anterior Poliomyelitis	2	1	—	—	—	—	—	—	2	1
Anthrax	1	—	—	—	—	—	—	—	1	—
Pneumonia	5	1	2	—	9	—	3	4	19	5
	229	88	20	9	104	102	63	49	420	244
Cases treated in Hospital	155	73	14	8	101	91	33	42	303	224
Cases treated at home or privately	74	15	6	1	3	11	30	7	117	20

NOTE:

There were fourteen "Diphtheria Carriers" notified during the year, **not included** in above table.

The following also are notifiable infectious diseases, but there have been no cases during the past year: Plague, Cholera, Smallpox, Relapsing Fever, Glanders, Rabies, Yellow Fever, Sleeping Sickness, Encephalitis Lethargica.

SCARLET FEVER.

The following table shows the Cases Notified and Deaths from Scarlet Fever registered during the past six years:—

Year	1919–20	1920–21	1921–22	1922–23	1923–24	1924–25	
						Boro.	Imptd.
Cases	30	24	20	32	30	18	1
Deaths	—	—	—	1	1	—	—

Borough Europeans only:
Case Incidence per 1,000 of population equals .36

CASES: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	5	2	3	—	—	1	3	1	3	1	19
Coloured	—	—	—	—	—	—	—	—	—	—	—
Native	—	—	—	—	—	—	—	—	—	—	—
Asiatic	—	—	—	—	—	—	—	—	—	—	—
	5	2	3	—	—	1	3	1	3	1	19

BOROUGH CASES: AGE AND SEX DISTRIBUTION.

Ages	European M.	European F.	Coloured M.	Coloured F.	Native M.	Native F.	Asiatic M.	Asiatic F.	Total M.	Total F.
0— 1 year	—	—	—	—	—	—	—	—	—	—
1— 2 years	—	—	—	—	—	—	—	—	—	—
2— 5 "	1	2	—	—	—	—	—	—	1	2
5—15 "	2	8	—	—	—	—	—	—	2	8
15—25 "	1	1	—	—	—	—	—	—	1	1
25—45 "	1	2	—	—	—	—	—	—	1	2
45—65 "	—	—	—	—	—	—	—	—	—	—
	5	13	—	—	—	—	—	—	5	13

DEATHS .... Nil

DIPTHERIA.

The following table shows the cases notified and deaths from Diphtheria registered during the past six years.

Year	1919–20	1920–21	1921–22	1922–23	1923–24	1924–25	
						Boro.	Impt.
Cases	94	69	74	58	88	83	15
Deaths	2	5	7	2	6	3	1

Borough Europeans only.

Case Mortality 2.4 per cent.

Case Incidence per 1,000 of population. 1.69

Death Rate per 1,000 of population 0.040

CASES: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	11	8	12	7	8	19	6	2	10	14	97
Coloured	—	—	—	—	—	1	1	—	—	—	2
Native	1	—	—	—	—	—	—	—	—	1	2
Asiatic	—	—	—	1	—	—	1	—	—	—	2
Totals	12	8	12	8	8	20	8	2	10	15	103

BOROUGH CASES: AGE AND SEX DISTRIBUTION

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0— 1 Year	1	1	—	—	—	—	—	—	1	1
1— 2 Years	1	1	—	—	—	—	1	—	2	1
2— 5 „	10	9	1	—	—	—	—	—	11	9
5—15 „	21	25	1	—	—	—	—	1	22	26
15—25 „	3	3	—	—	1	—	—	—	4	3
25—45 „	2	6	—	—	—	—	—	—	2	6
45—65 „	—	—	—	—	—	—	—	—	0	0
Totals	38	45	2	—	1	—	1	1	42	46

DEATHS: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	—	—	1	—	—	1	—	—	—	1	3
Coloured	—	—	—	—	—	—	—	—	—	—	0
Native	—	—	—	—	—	—	—	—	—	—	0
Asiatic	—	—	—	1	—	—	—	—	—	—	1
Total	—	—	1	1	—	1	—	—	—	1	4

BOROUGH DEATHS: AGE AND SEX DISTRIBUTION.

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	—	—	—	—	—	—	1	—	1	—
2— 5 „	—	1	—	—	—	—	—	—	—	1
5—15 „	—	1	—	—	—	—	—	—	—	1
15—25 „	—	—	—	—	—	—	—	—	—	—
25—45 „	—	—	—	—	—	—	—	—	—	—
45—65 „	—	—	—	—	—	—	—	—	—	—
Totals	—	2	—	—	—	—	1	—	1	2

ENTERIC FEVER.

The following table shows the cases notified and deaths from Enteric Fever registered during the past six years.

Year	1919–20	1920–21	1921–22	1922–23	1923–24	1924–25	
						Boro.	Impt.
Cases	259	110	139	353	125	76	72
Deaths	36	11	26	52	37	21	15

Borough Europeans only.

Case Mortality	11.300 per cent.
Case incidence per 1,000 population	.890
Death Rate per 1,000 population	.101

CASES: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	7	6	6	5	2	5	2	6	5	41	85
Coloured	1	—	—	3	—	—	1	—	—	1	6
Native	8	—	2	3	—	—	—	3	1	26	43
Asiatic	3	—	1	2	—	3	—	1	—	4	14
Total	19	6	9	13	2	8	3	10	6	72	148

BOROUGH CASES, AGE AND SEX DISTRIBUTION.

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	—	—	—	—	—	—	—	—	—	—
2— 5 ,, ...	1	1	—	—	—	1	1	—	2	2
5—15 ,, ...	8	2	1	—	—	—	2	—	11	2
15—25 ,, ...	10	6	2	1	4	1	5	1	21	9
25—45 ,, ...	6	7	1	—	9	1	1	—	17	8
45—65 ,, ...	1	2	—	—	1	—	—	—	2	2
Total	26	18	4	1	14	3	9	1	53	23

DEATHS: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	—	—	—	—	—	3	1	—	1	4	9
Coloured	—	—	—	2	—	—	1	—	—	1	4
Native	6	1	—	—	1	1	1	—	—	8	18
Asiatic	—	—	—	—	—	3	—	—	—	2	5
	6	1	—	2	1	7	3	—	1	15	36

BOROUGH DEATHS: AGE AND SEX DISTRIBUTION

	European		Coloured		Native		Asiatic		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	—	—	—	—	—	—	—	1	—	1
2— 5 ,, ...	—	—	—	—	—	—	—	—	—	—
5—15 ,, ...	—	—	2	—	—	—	—	—	2	—
15—25 ,, ...	2	1	—	—	6	—	2	—	10	1
25—45 ,, ...	2	—	1	—	3	1	—	—	6	1
45—65 ,, ...	—	—	—	—	—	—	—	—	—	—
Total	4	1	3	—	9	1	2	1	18	3

INFECTIOUS DISEASES HOSPITAL.

During the past year 340 cases of Infectious Diseases have been isolated at the Infectious Diseases Hospital, Congella, viz:—

	European		Coloured		Native		Asiatic		Total	
	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.
Diphtheria	74	14	1	0	2	3	0	0	77	17
Scarlet Fever	10	1	0	0	0	1	0	0	10	2
Measles	40	12	0	0	30	2	0	0	70	14
Chicken Pox	2	1	0	0	34	1	2	0	38	2
Mumps	4	1	1	0	7	1	1	0	13	2
Whooping Cough	23	3	7	0	1	0	0	0	31	3
Cerebro-Spinal Meningitis	1	0	1	2	2	0	2	1	6	3
Pulmonary Tuberculosis	5	0	0	0	0	0	0	0	5	0
Other Forms Tuberculosis	2	0	0	0	0	0	0	0	2	0
Typhus	6	2	0	0	0	1	0	0	6	3
Influenza	0	1	1	0	7	0	0	0	8	1
Observation	10	0	0	0	6	1	1	2	17	3
Leprosy	0	0	0	0	0	1	0	0	0	1
Erysipelas	2	1	0	0	0	0	0	0	2	1
Dysentery	2	0	0	0	0	0	0	0	2	0
Scarlantina	1	0	0	0	0	0	0	0	1	0
	182	36	11	2	89	11	6	3	288	52

NOTE: Included in the Diphtheria Cases, there are 14 European Diphtheria Carriers.

DIPHTHERIA: AGE AND SEX DISTRIBUTION.

	0–1 year	1–2 years	2–5 years	5–15 years	15–25 years	25 and over	Total
Male	3	1	11	18	5	3	41
Female	2	2	11	26	3	9	53
	5	3	22	44	8	12	94

The average length of stay in Hospital for the above 94 patients was 31 days.

DEATHS: 2.

SCARLET FEVER: AGE AND SEX DISTRIBUTION.

	0–1 year	1–2 years	2–5 years	5–15 years	15–25 years	25 and over	Total
Male	—	—	1	1	2	1	5
Female	—	—	1	6	—	—	7
	—	—	2	7	2	1	12

The average length of stay in Hospital for the above 12 patients was 35 days.

DEATHS: Nil.

TOTAL DEATHS AT INFECTIOUS DISEASES HOSPITAL.

	European		Coloured		Native		Asiatic		Total	
	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.	Bor.	Imp.
Whooping Cough	—	1	—	—	—	—	—	—	—	1
Diphtheria	1	1	—	—	—	—	—	—	1	1
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Chickenpox	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal-Meningitis	1	—	1	—	1	—	1	2	4	2
Typhus Fever	—	—	—	—	—	1	—	—	—	1
Pneumonia	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—
	2	2	1	—	1	1	1	2	5	5

PULMONARY TUBERCULOSIS.

The following table shows the Cases Notified and Deaths from Pulmonary Tuberculosis registered during the past six years:—

Year	1919–20	1920–21	1921–22	1922–23	1923–24	1924–25	
						Boro.	Impt.
Cases	129	84	83	115	166	144	110
Deaths	58	79	61	107	84	106	68

Borough Europeans only:

Case Incidence per 1,000 of population equals	.856
Death Rate per 1,000 of population equals	.591

CASES: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	13	5	4	6	2	2	5	4	1	20	62
Coloured	1	3	—	—	—	3	—	—	1	8	16
Native	30	2	1	3	—	14	—	7	1	53	111
Asiatic	5	5	1	7	2	16	—	—	—	29	65
	49	15	6	16	4	35	5	11	3	110	254

BOROUGH CASES: AGE AND SEX DISTRIBUTION.

Ages.	European M.	European F.	Coloured M.	Coloured F.	Native M.	Native F.	Asiatic M.	Asiatic F.	Total M.	Total F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	1	—	—	—	—	—	—	—	1	—
2— 5 ,, ...	—	—	—	—	—	—	—	—	—	—
5—25 ,, ...	—	—	—	—	1	—	1	1	2	1
15—25 ,, ...	—	2	—	2	13	—	4	8	17	12
25—45 ,, ...	13	7	2	2	41	1	6	10	62	20
45—65 ,, ...	15	4	2	—	1	1	3	3	21	8
	29	13	4	4	56	2	14	22	103	41

DEATHS: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
European	8	2	4	3	1	4	3	2	2	9	38
Coloured	—	1	—	1	—	1	—	—	—	3	6
Native	21	5	—	—	2	9	—	—	—	48	85
Asiatic	6	1	—	9	3	17	—	—	1	8	45
	35	9	4	13	6	31	3	2	3	68	174

BOROUGH DEATHS: AGE AND SEX DISTRIBUTION.

Ages.	European M.	European F.	Coloured M.	Coloured F.	Native M.	Native F.	Asiatic M.	Asiatic F.	Total M.	Total F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	—	—	—	—	—	—	—	—	—	—
2— 5 „	1	—	—	—	—	—	1	—	2	—
5—15 „	—	—	—	1	—	—	1	3	1	4
15—25 „	2	1	—	—	7	—	5	8	14	9
25—45 „	8	4	—	—	24	1	6	5	38	10
45—65 „	12	—	1	1	5	—	5	3	23	4
Over 65	1	—	—	—	—	—	—	—	1	—
	24	5	1	2	36	1	18	19	79	27

NON-PULMONARY TUBERCULOSIS.

The following table shows Cases Notified and Deaths from Non-Pulmonary Tuberculosis, registered during the past six years:—

Year	1919–20	1920–21	1921–22	1922–23	1923–24	1924–25	
						Boro.	Impt.
Cases	26	14	14	18	58	38	32
Deaths	18	7	11	23	52	15	14

Borough Europeans only:—

Case Incidence per 1,000 of population equals .... .224

Death Rate per 1,000 of population equals .... .1574

CASES: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	3	2	1	2	—	—	—	1	2	6	17
Coloured	1	—	—	—	1	—	—	—	—	—	2
Native	11	—	—	2	—	4	—	—	—	16	33
Asiatic	—	—	—	1	—	7	—	—	—	10	18
	15	2	1	5	1	11	—	1	2	32	70

BOROUGH CASES: AGE AND SEX DISTRIBUTION.

Ages.	European M.	European F.	Coloured M.	Coloured F.	Native M.	Native F.	Asiatic M.	Asiatic F.	Total M.	Total F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	—	—	—	—	—	—	—	—	—	—
2— 5 „	1	—	—	—	—	—	1	—	2	—
5—15 „	2	2	—	—	—	—	1	—	3	2
15—25 „	—	—	—	—	2	—	—	1	2	1
25—45 „	1	—	1	1	15	—	4	—	21	1
45—65 „	4	—	—	—	—	—	1	—	5	—
Over 65 Years	1	—	—	—	—	—	—	—	1	—
	9	2	1	1	17	—	7	1	34	4

DEATHS: WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	8	9	Impt.	Total
Europeans	2	—	—	1	—	1	—	—	—	3	7
Coloured	—	—	—	—	—	—	—	—	—	1	1
Native	6	—	—	1	—	—	—	—	1	6	14
Asiatic	—	—	—	2	—	1	—	—	—	4	7
	8	—	—	4	—	2	—	1	—	14	29

BOROUGH DEATHS: AGE AND SEX DISTRIBUTION.

Ages.	European M.	European F.	Coloured M.	Coloured F.	Native M.	Native F.	Asiatic M.	Asiatic F.	Total M.	Total F.
0— 1 Year	—	—	—	—	—	—	—	—	—	—
1— 2 Years	—	—	—	—	—	—	—	—	—	—
2— 5 „	—	—	—	—	—	—	1	—	1	—
5—15 „	—	—	—	—	—	—	—	—	—	—
15—25 „	—	—	—	—	1	—	1	1	2	1
25—45 „	1	—	—	—	6	1	—	—	7	1
45—65 „	—	—	—	—	—	—	—	—	—	—
65 and over	3	—	—	—	—	—	—	—	3	—
	4	—	—	—	7	1	2	1	13	2

VENEREAL DISEASES.

PATIENTS TREATED AT SPECIAL CLINIC, ADDINGTON HOSPITAL.

FROM 1st OCTOBER, 1924, to 30th SEPTEMBER, 1925.

Out Patients—New Cases

European—	
Male	151
Female	60
Indian—	
Male and Female	16
Native—	
Male and Female	48
Coloured—	
Male and Female	12
Non-Venereal	13
	300

Injection of N.A.B..

European—	
Male and Female	432
Indian—	
Native and Coloured	34

Irrigation.

European—	
Male	2,018
Female	602

Dilatations.

Europeans	32
Coloured and Indians	3
Wassermann Tests	244
Slides and Smears	231
Vaccine Injection	232
Intramine	3
TOTAL ATTENDANCES AT CLINIC	3,794

IN-PATIENTS.

European—	
Male	78
Female	31
Native—	
Male	191
Indian—	
Male	22
Coloured—	
Male	15
Female: Native Indian Coloured	72
	409
Babies born in Ward	8

Injection of N.A.B.

European—	
Male and Female	158
Native—	
Indian and Coloured	1,025

Irrigation.

European—	
Male	1,653
Female	38
Native—	
Male	3,054

RETURN OF WORK DONE AT DISINFECTING STATION

1st July, 1924, to 30th July, 1925.

1. Number of Houses and Rooms disinfected.
2. Number of Articles washed and disinfected: Private houses.
3. Number of Articles washed and disinfected: Infectious Diseases Hospital.
4. Number of Articles disinfected: Typhus precautions.

Months.	1 Rooms, etc.	2 Private Houses	3 Hospital	4 Typhus
1924.				
July	50	775	2,391	8,828
August	61	1,140	4,241	8,620
September	39	920	2,125	9,024
October	46	1,589	2,384	8,756
November	36	961	2,708	9,216
December	27	762	2,689	8,192
1925				
January	40	1,002	2,976	12,926
February	38	927	3,325	11,958
March	49	1,326	3,236	12,072
April	39	940	2,872	11,436
May	42	1,200	3,120	9,864
June	49	4,286	3,340	9,928
Totals	516	15,828	35,407	120,820

AMBULANCE REMOVALS.

Hospital	European	Coloured	Native	Asiatic	Total
Infectious Diseases Hospital	140	3	103	6	252
Addington Hospital	44	3	49	4	100
Other Hospitals	39	1	1	2	43
Totals	223	7	153	12	395

CORPORATION DEPARTMENTS.

Department.	Towels	Coats	Trousers	Blankets	Total
Sanitary	8,828	—	—	—	8,828
Abattoir	876	537	104	—	1,517
Electrical	536	—	—	—	536
Fire	190	65	—	392	647
Foreman of Works	335	—	—	—	335
Water	499	—	—	—	499
Tramways	425	—	—	—	425
Market	460	856	12	—	1,328
Police	—	—	—	2,921	2,921
TOTAL	12,149	1,458	116	3,313	17,036

CLEANSING STATION.

1st July, 1924, to 30th June, 1925 ...... EUROPEANS Cleansed 7,337

November, 1924, to 30th June, 1925 ...... NATIVES Cleansed 30,200

TOTAL 37,537

OCEAN BEACH.

Month.	Towels	Costumes	Slips	Totals
1924				
July	5,011	4,663	644	10,318
August	3,242	2,708	472	6,422
September	2,315	1,985	417	4,717
October	3,251	2,937	569	6,757
November	4,902	4,223	1,373	10,498
December	7,857	7,610	2,147	17,614
1925				
January	8,486	8,092	2,197	18,775
February	8,267	6,995	1,855	17,117
March	5,869	3,175	911	9,955
April	5,619	3,260	713	9,592
May	3,398	1,812	540	5,750
June	3,468	1,812	462	5,742
	61,685	49,272	12,300	123,257

TOWN BATHS.

Month	Towels	Costumes	Turkish Towls	Sheets	Sundry Articles	Blankets.	Totals
July	6,759	141	196	64	60	24	7,244
August	6,555	145	181	65	69	12	7,027
September	5,623	79	147	76	82	24	6,031
October	5,644	106	149	57	58	18	6,032
November	5,543	100	157	58	73	10	5,941
December	5,215	97	133	60	79	17	5,601
1925							
January	5,436	131	201	64	191	12	6,035
February	4,525	156	213	60	62	11	5,027
March	4,561	104	135	57	92	16	4,965
April	4,409	164	110	53	52	6	4,794
May	5,016	88	165	52	65	12	5,398
June	5,315	75	191	58	84	18	5,741
	64,601	1,386	1,978	724	967	180	69,836

MATERNITY AND CHILD WELFARE REPORT 1924/1925.

To the Medical Officer of Health,

Dear Sir,

From a Maternity and Child Welfare point of view, the year 1924/1925 provides nothing of an outstanding nature, but steady progress has been made.

One gets the impression that public opinion is more in favour of this movement. Certainly the people coming to the department are less ignorant in the feeding and management of babies than they were, and having seen the results of this department are much more ready to be taught right methods than was the case some years ago.

In former years a mother of a large family would bring a baby to a clinic just to tell us how she was feeding it, for our information, and if we passed any criticism of her methods no notice was taken, but now, mothers of the same size of families come and ask for our advice.

This is very distinctly a step in advance.

One also feels that there has been some increase in natural feeding as distinct from bottle feeding, though there is still a great deal of unnecessary bottle-feeding practised, but the campaign which has been ceaselessly waged at the Centres since they started four years ago has undoubtedly been successful in increasing the amount of breast feeding.

One thing which a department of this sort has to contend against is the advertising of Infant Foods. Many firms send round advertisements of their particular foods and these advertisements are frequently accompanied by samples. A mother cannot help being impressed with all the claims that are made for these various foods, so frequently tries one of these samples; she finds her baby likes the food so decides it must be good for it and gives perhaps one bottle in the day. This in itself might do no harm, but the baby finds it is an easy method of getting food and the next thing one hears is that the baby has refused to take the breast, so has been weaned, as the mother thinks when the baby refuses, it is because there is no longer any milk there.

One firm dealing in Infant Foods went so far as to employ a nurse who visited as far as possible every baby born in Durban and left a sample of Infants, Food and instructions how to use it. This necessitated constant tracking by the Health Visitors who freqnently arrived too late to save the child from the evils of artificial feeding. This nurse has, however, been recently removed from the town and the Health Visitors can now continue their usual routine without having to keep a special lookout for their best breast-fed babies being put on artificial food between their visits.

If, to this commercialising of the diet of infants, there were no counteracting influence in the shape of Maternity and Child Welfare Centres, it can readily be imagined that the day would soon come when artificial feeding would be the national custom, to be quickly followed by the day when woman, through neglect to use it, would be unable to perform one of her most precious attributes.

STAFF.

During the year the staff of this department has been increasing. In January, 1925, a Midwife was added to the staff, and in April and July two more Health Visitors were taken on.

There is more than enough work for the Health Visitors to do, and the Midwife was a very valuable addition to the staff.

A few midwives in the town, doing district work, will attend a case for £3 3s. 0d., the majority charging £6 6s. 0d. When a patient applies here to be attended by the Municipal Midwife, a note is taken of the circumstances of the family, If they are not in circumstances to pay £3 3s. 0d. the Municipal Midwife attends the case. These people would otherwise be left to the untrained handywoman, and it is hoped that much maternal morbidity will be prevented by such people getting the attention of a trained midwife.

The people who are attended by the Municipal Midwife pay a small sum to this department according to their circumstances.

A list is kept here of the midwives who will attend cases for £3 3s. 0d. and when the circumstances are found to be such that it is considered the patient can afford this she is referred to one of midwives on this list.

CENTRE ATTENDANCES.

INFANT CLINICS.—One cannot exaggerate the importance of regular attendance at these Clinics.

Very few ordinary people can afford to go to a docter once a week to have their babies weighed and looked at, and yet the importance of this procedure is at last beginning to be appreciated. When a breast-fed baby comes along and is found to be losing weight, one does not say to the mother "this baby is not thriving on the breast, it must be given a bottle." What is done at the Clinic is that this baby is given a test feed, or several test feeds, in order to ascertain how much breast milk it is actually getting in the day. What is meant by a test feed is that a baby is weighed before it is put to the breast, then given a feed and weighed again after the feed—this must be done on a very accurate scale—and the difference in weight shows the number of ounces of breast milk such a baby is getting. It is known how much milk a baby of that weight ought to get at each feed, and when the amount is below what it should be, the mother is advised to make up that amount at each feed in the 24 hours, or at one or several of the feeds, by some artificial food as nearly approximately to the standard of breast milk as possible. Frequently this supplementary feeding is only a temporary measure, and as the mother gets stronger she is able to dispense with the artificial food altogether, but it is only by weighing the baby regularly and giving test feeds at regular intervals that one can judge the needs of the child.

A most gratifying fact is that quite a number of young mothers now come here asking if they can have a test feed and when they see for themselves the difference in weight, they go away perfectly satisfied.

To see a child only when it is ill gives a doctor very little chance of keeping such a child healthy.

There is no disputing the fact that the first year of life is the most important of a lifetime, and the importance of regular supervision cannot be exaggerated.

Not only is the health of the children attending the Centres better than that of those who do not attend, but many children owe their lives to the fact that they were taken regularly to the Centres by their mothers. This statement can readily be proved by figures, not only in this town, but it is the experience in other towns as well where child welfare work is active, that the mortality rate of children attending the Child Welfare Centres is a fraction of the mortality rate for the town as a whole.

During the year a pamphlet has been printed for this department, giving an outline of the feeding of infants and children; this has been much appreciated and many mothers come and ask if they may have it.

ANTE-NATAL CLINICS.—These Clinics are becoming more popular. There is now much less difficulty in getting people to attend them, as they realise the importance of being kept under supervision during pregnancy, and appreciate the help they get from them more as time goes on.

The Municipal Midwife is present at all the Ante-Natal Clinics; the cases she is going to attend come to the Clinics regularly beforehand and she has an opportunity of keeping them under supervision during pregnancy.

HEALTH TALKS AND SEWING CLASSES.—These have been given on one afternoon each week during the year by one of the Health Visitors, and have been fairly well attended.

TALKS TO SCHOOL-GIRLS.—Instruction has been given to classes of girls who are about to leave school. They are shown how to wash a baby, to keep feeding bottles clean and other simple principles of child-welfare, which all girls should know.

MILK AND DRIED MILK.—Milk and Dried Milk is given to necessitous families. Particulars are kept of the circumstances of the families in receipt of free milk, and they are kept under the constant supervision of a Health Visitor, who at once notes any change in circumstances.

This has been the means of saving the lives of many babies who at an early age would just have been given a "bit of what we have ourselves" with the usual disastrous consequences.

The figures for the year are as follows:—

Total Medical Sessions	198
Total Ante-Natal Sessions	49
Total Attendances at Clinic	9,053
New Cases out of above number	1,515
Total Mothercraft Lectures	49
Total Number of Mothers attending	311
Total notifications of births	948
Number of Cases who have received Dry Food at Cost Price	81
Number of Cases who have received Dry Food Free	312
Amount of Dry Food bought at Cost Price	670 lbs.
Amount of Dry Food Given Free	1,844 lbs.
Number of Cases who have received Sterilised Milk Free	51

TOTAL VISITS BY HEALTH VISITORS.

	New	Old	Left	Out	Expectant Mothers	Deaths	Stillbirths	Diphtheria	Tuberculosis	Typhus	Total
Miss Davies	294	1,000	62	118	47	8	1	4	3	3	1,540
Miss Standing	362	1,255	68	64	84	—	3	—	—	—	1,836
Miss Woodward	160	339	—	287	—	—	—	—	—	—	796

Miss Woodward commenced duty 27th April, 1925.

During the six months ending 30th June 1925, the Municipal Midwife attended 17 confinement cases. There was no mortality in mother or child and no septic complications occurred.

During the year there were 720 children under one year on the books of the department, i.e. either attending the Clinics or being attended by the Health Visitors.

Out of these 720 children there were 21 deaths.

If this rate of deaths had held for the town as a whole there would have only been an Infantile Death Rate of 29.1 thousand, but the actual Infantile Mortality Figure for the town was 83.8.

These figures show without any further comment the work that is being done by the Child Welfare Department.

I am,
Yours faithfully,
K. Mc NEILL,
Medical Officer in Charge, M. & C.W. Dept.

ABATTOIR.

The Abattoir Director reports that during the Municipal year the number of animals slaughtered was:—

Cattle	30,336
Calves	2,134
Sheep and Goats	130,819
Pigs	11,599
TOTAL	174,888

The number of carcasses found to be diseased, necessitating condemnation, were:—

DISEASE.	BEEF	MUTTON	PORK	VEAL
Cysticercus Bovis.	382	—	—	46
Cysticercus Cellusosae	—	—	978	—
Dropsy and emaciation	202	1,441	11	34
Tuberculosis	25	—	12	—
Injuries	9	8	1	2
Dead in Pen	5	6	—	—
Dead in Truck	2	3	—	—
Sarcosporidia	3	—	7	—
Moribund	2	6	—	—
Jaundice	—	21	—	3
Puepera Haemorrhagica	4	1	—	—
Pyaemia	1	4	—	—
Septicaemia	1	—	—	1
Uraemia	1	—	—	—
Melanosis	1	—	—	—
Immature	—	—	—	1
Abscesses	—	4	—	—
Acute Inflammation	—	1	—	—
Decomposing	—	—	2	—
TOTAL	638	1,495	1,011	87

During the year 189,632 portions of carcasses, meat, and offals were condemned and destroyed as being unfit for human consumption.

SANITARY DEPARTMENT.

Office of the Chief Sanitary Inspector,
Old Court House Buildings,
Durban, December 20th, 1925.

The Medical Officer of Health,
Durban.

Dear Sir,

I beg to submit the following summarised report on the work of the Sanitary Department for the year ended 30th June, 1925:—

Complaints investigated	1,005
Notices issued—personal intimations	5,786
Notices issued—written	2,460
Reports made on applications for licenses	3,519
Inspection of cyanide fumigations	433
Visits made in connection with infectious diseases	759
Reports made to other departments by letter	825

INSPECTIONAL WORK.

NATURE OF PREMISES	NUMBER OF VISITS
Hotels and Boarding Houses	1,585
Restaurants, Tea rooms, Eating Houses	3,383
Bakeries	346
Butcheries	2,860
Dairies—within the Borough	337
Dairies Outside the Borough	369
Laundries	1,605
Markets	688
Offensive Trades	255
Night Inspections	169
General Inspections	39,001
Total Inspections	50,598

DISTRICT SANITARY INSPECTORS' REPORTS ON DEFECTIVE OR INSANITARY CONDITIONS REMEDIED.

NUISANCES.

From defective or dirty stables, kraals, cowsheds, etc, abated	182
From factories or trade premises abated	155
From dirty yards, gulleys, W.C's etc. abated	2,291
From discharge of foul water to the street discontinued	289
From unauthorised deposits of refuse discontinued	510
From accumulation of offensive matter abated	339
From smoke abated	19
From overgrown lands, etc, cleared	123

Measures taken to prevent breeding, and to destroy

1. Flies	93
2. Mosquitoes	204
3. Rats	214

STRUCTURAL REPAIRS.

General repairs to premises	271
Chimneys—repaired or renewed	33
Roofs—repaired or renewed	241
Gutters and Down Pipes—repaired or renewed	343
Floors—repaired or renewed	166
Lighting—improved or provided	73
Ventilation—improved or provided	135

SANITARY FITTINGS.

W.C. pans, sinks, baths, and gullies repaired or renewed	412
W.C. Cisterns—repaired or renewed	345
Waste and flush pipes—repaired or renewed	222
Waterclosets—repaired	89
Separate watercloset accommodation provided for females	25
Privies—provided or repaired	24
Privies—demolished	2
Sewerage installed	57
Native type of watercloset pan substituted for European type	2
Bathing facilities for natives provided	1

DRAINS.

Man-holes, traps, vents, etc. repaired or renewed	74
Drains connected with the sewer	7
Storm water drains disconnected from the sewer	53
Storm water drains provided or repaired	34
Cast iron pipes laid across footpath for conveyance of storm water	88
Yard paving carried out	69
Sinks installed	3

GENERAL.

Water supply—installed or improved	14
Water supply—defective fittings repaired	180
Overcrowding—discontinued	34
Verminous premises—vermin eradicated	312
Other premises—limewashed or colourwashed	473
Other premises—cleaned	242
Receptacles—manure and refuse, provided or renewed	1,457
Shanties unfit for habitation; vacated or demolished	66

HOUSING ILLEGAL HOUSING OF NATIVES DISCONTINUED	95
sleeping in unapproved premises discontinued	136
Illegal erections demolished	25

REPORTS TO OTHER DEPARTMENTS.

Water Engineer: Choked drains 199. defective water fittings	122
Borough Engineer's Department: Defective or insanitary conditions	133
Other Departments	135

MILK SUPPLIES.

One new dairy was licensed within the Borough, bringing the total up to 22 licensed premises, whilst the number of dairy premises outside of the Borough licensed to sell milk in Durban had increased to 78.

337 inspections, representing an average of 15.3 to each dairy in the Borough were made, and 369 inspections, representing an average of 4.7 to each dairy were made of those places outside the Borough licensed to sell milk within the Municipal boundaries.

The following improvements were effected at the instance of this department, viz:

COWSHEDS.

Within the Borough, newly erected	1
Outside the Borough, newly erected	19
Erected to replace unsatisfactory building	7
Extensions to existing buildings	6
General repairs effected	25
New dairies licensed (outside)	19
New applications refused (outside)	14
Repairs to walls, floors, etc.	35
Overcrowding of cow-sheds abated	3
Water supply improved	9
Dairies given up or closed down	6
Dairies changed ownership	6
Premises lime-washed after notice given	29
Servants' quarters limewashed	8

MILK-ROOMS:

Erected	19
Fly Screened	27

BOILERS:

Provided	19
Repaired	19
Renewed	5
Not regularly used—warnings given	43

BAKEHOUSES AND FOOD FACTORIES.

Change rooms provided	3
Lavatory basins provided	6
Overalls provided	25
Fly screening provided	25
Floors repaired or renewed	24
W.C's drains, etc., removed from building	1
Walls, etc., limewashed, painted, or otherwise cleaned	117
Sleeping in store or workroom discontinued	6
Unsuitable receptacles (Food) replaced.	31
Unclean clothes	5
Vehicles—cleaned or improved	24

ANTI PLAGUE PRECAUTIONS: Very careful attention was given to this branch of the work by the District Inspectors, as well as by the overseer who devotes his whole time to these duties.

So far as we can judge, the town is in as favourable a position in the matter of precautions as it has ever been. The supervision of premises is frequent and regular, and wherever evidence is found of the existance of rats, the occupiers are required to take steps to exterminate them, to remove harbourage, and to prevent them gaining access to buildings.

The practice of keeping fowls, so universal among householders, is largely responsible for the existence of rats and mice about houses Wherever lumber is kept or thick vegetation exists, there is likely to be harbourage for rats, and if in addition, fowl food and water vessels are accessible, these pests are certain to be attracted to the premises.

The result of the rat-catchers' work looks very small, but a good deal of their time is taken up in the laying of poison, and gassing runs with the "Clayton" machine imported last year, and there is no doubt that many more rats were killed by these means than were caught in the traps. Since occupiers were required to pay the Council for trapping on their premises, there has been practically no demand for the services of the rat-catchers, whose work is practically confined to Corporation premises and vacant lands.

Proceedings were taken under the Regulations for the prevention of Rodent Infestation of Buildings and Premises in Urban areas against two occupiers who failed to comply with the orders for the removal of conditions favourable to the harbourage of rats. Both were found guilty and fined.

Total inspections made	5,879
Rats destroyed on Corporation property	2,536
Rats reported to have been destroyed on private premises	1,894
Rats caught by Departmental rat-catchers	610
Notices served on persons in terms of the Rodent Infestation Regulations	335

FLY PREVENTION: This is another matter that receives the constant attention of the Inspectors and Overseers, and the measures taken to prevent the development of flies met with considerable success. The usual precautionery measures were carried out at the refuse tips where 25,816 gallons of fly poison were used.

CYANIDE FUMIGATION: Notwithstanding the large and increasing sales of insecticides, the treatment of vermin infected premises by cyanide fumigation is steadily growing.

Supervision of this dangerous work takes up a good deal of the Inspectors' time, and it is a matter of gratification that no fatalities have occurred in any of these operations carried out in the Borough. There are 6 licensed fumigators, and between them 433 premises were fumigated during the year.

ANTI MALARIAL PRECAUTIONS: The area of swampy lands within the Borough is steadily, if slowly, being diminished by various measures of reclamation, but it will be necessary to continue the services of the small gang employed in spraying and ditching work until the whole of the low lying land is reclaimed.

Spraying was carried out rather more frequently than in past years, and 3,659 gallons of crude oil were used for this purpose as compared with 2,583 gallons in the previous year.

HOUSING: On the whole there has been considerable improvement of the housing position, but in respect of the lower paid workers, the improvement is very slight. The need for small self contained houses with the usual accessories of civilised town life is very acute. Hundreds of such houses are still required if the ideal of one family to one house is to be attained, and the rents must be commensurate with the wages of the lower paid workers. At the present time the poorer classes cannot hope to rent a house for themselves unless they keep one or two lodgers or sub-let part of the house.

This results in families living, sleeping, cooking, and keeping their daily food supplies all in the same rooms, and it must be borne in mind that these rooms seldom have fireplaces. The cooking is frequently done on evil smelling oil stoves, and rooms already uncomfortable with the summer heat are rendered well nigh unbearable with the additional heat of the stoves.

Not only must such conditions be detrimental to the health of the occupants, but they are bound to result in deterioration of character as well. One cannot expect people to take pride in their homes and surroundings in such circumstances.

A new feature in connection with housing is the large number of flat dwellings that are being erected; whilst these flats are all helping to solve the housing difficulty by providing additional accommodation, there are many that are very congested.

These will probably provide new public health problems to be dealt with in the future.

NATIVE AND ASIATIC COMPOUNDS OR BARRACKS: The scarcity of house accommodation for Native and Indian labourers is also very great Many premises in occupation by these people are practically unfit for habitation, and could be closed if suitable accommodation were available.

This applies to Corporation as well as private barracks and compounds. The expansion of this branch of housing has not kept pace with the increasing numbers of labourers employed, and at the present time, the number of Indians in Corporation employment for whom no rooms are available is approximately 200.

This seriously effects the standard of labour as well as the supply, for men, on finding that they will have to wait for months before their turn comes to get a room, naturally prefer to take employment where they have the assurance of getting accommodation which is part of their emoluments. The result is there is a great difficulty in keeping the gangs up to strength. Old and otherwise unsuitable men have to be retained because of the difficulty in replacing them. If a sufficiency of rooms were available, the Corporation departments could pick and choose their labourers and get a much better type.

The question of barracks accommodation for both Natives and Asiatics has been acute for a long time, and must seriously affect the efficiency of this class of labour if proper and adequate provision is not made.

INDIAN BARRACKS (PRIVATE)

There are 14 private Indian barracks containing a population of 771. Of these, 9 are under European supervision, the remainder being managed by Indians.

All have the Corporation water supply, but 7 are out of the sewered area. They are classified as follows, viz:

Good	3
Fair	8
Poor	2
Bad	1

(NATIVE BARRACKS—PRIVATE)

There are 130 private barracks or compounds in which not less than 10 men are housed, and the total population is 6,266.

The majority are under direct European control and supervision, the remainder being managed by Indians or natives.

The structural and sanitary classification is,

Good	86
Fair	30
Poor	11
Bad	3

The health of the inmates has been good, no outbreak of infectious diseases having been reported.

OFFENSIVE TRADES.

List of offensive trades on our register as at June 30th, 1925:

Soapmakers	4
Dealers in hides, skins and wool	34
Breweries	1
Wattle bark grinderies	4
Refuse depositing sites	7
Wool washeries	1
Abattoirs	2
Manufacture of fertilizers	1
Refuse destructor	1

NOTE: The abattoir, refuse destructor, and refuse depositing sites are Municipal institutions.

FOOD AND DRUGS.

During the year the following samples were taken and submitted to the Public Analyst, viz:

Article	No. of Samples	Genuine	Below Standard
Milk	208	174	34
Cream	3	—	3
Butter	7	7	—
Bread	15	15	—
Jam	2	2	—
Ice Cream	2	2	—
Coffee	1	—	1
Sweets	5	5	—
Beer	4	4	—
Soda water	8	8	—
Coloured (raspberry) water	8	8	—
Dholl	3	3	—
Pepper	5	5	—
Vinegar	1	1	—
	272	234	38

In addition to the foregoing, 194 samples of milk and 208 samples of water were submitted to the Government Laboratory for bacteriological examination.

MILK SAMPLES.

Of the 208 samples of new milk submitted to the public analyst, 34 were certified by him to be below the standard of 3.0% milk fat, and 8.5% solids not fat fixed by the regulations.

In sixteen cases legal proceedings were taken, the result being all the accused being found guilty and fined.

In six cases, the dairymen concerned applied for test samples to be taken at the time of milking, and the analysis of these samples proved that the milk given by the cows was below standard, and the dairymen concerned were warned to take steps to improve the quality of their milk.

In one case where complaint had been received from a householder that he was being supplied with watered milk, a sample taken showed that the milk as it left the dairy was genuine. Suspicion attached to the native delivering the milk, and the dairies Inspector kept watch during the early hours of morning and caught the boy adding water to the milk at the complainant's house.

The native was arrested and received the salutory sentence of three months' imprisonment without the option of a fine.

In the remaining 12 cases, as the deficiency was slight, no action was taken, but letters of warning were sent to the dairy keepers responsible.

For the whole of the milk samples, including those under standard, the average composition was,

Milk Fat	3.404
Solids not fat	8.638
Total solids	12.042

UNSOUND FOOD SEIZED AND DESTROYED.

Article	Quantity	Where seized.
Hams	8	Borough Market
Bacon	1 roll	,,
Beef	125 lbs.	,,
Ox Hearts	2	,,
Geese	14	,,
Eggs	16 dozen	,,
Ipiti buck	4	,,
Condensed Milk	35 tins	131 Grey Street

UNSOUND FOOD HANDED OVER TO THE DEPARTMENT FOR DESTRUCTION.

Peaches	83 cases
Cheese	1,332 lbs.
Dried peaches	75 packets
Dried snoek	83 lbs.
Tinned hams	19
Jam	38 tins

PROSECUTIONS.

Law or Bye-law relating to Public Health Bye-Laws	Cases	Convictions.	Dismissals	Bails forfeited	Fines imposed		
					£	s.	d.
Nuisances	42	41		1	98	10	0
Conveyance of Food	1	1			2	0	0
Manufacture of Food	2	2			6	0	0
Selling Milk without license	1	1			1	0	0
Adulteration of Food Act 45 of 1901	16	16			79	0	0
Removal of refuse	2	2			1	10	0
House drainage Bye-laws	5	5		2	13	10	0
Building Bye-laws	5	5			10	0	0
Laundries	3	3			19	0	0
Rodents	2	2			2	0	0
PUBLIC HEALTH ACT 36 OF 1919.							
Sale of unwholesome, diseased, or contaminated articles of food	5	5			13	0	0
	84	83		3	£245	10	0

SANITARY SERVICES.

The following table shows the average number of carts, vans and tank carts employed daily and the quantity of material,—rubbish, street sweepings, and manure removed:

CARTS:

Rubbish	53
Street cleaning	14
Sand—for tips	2
Tank—night soil	3

MATERIALS REMOVED

	Loads
Rubbish	54,248
Street sweepings	18,651
Manure	1,403
Sand for covering tips	18,295
Total	92,597 loads

DISPOSAL OF REFUSE

Where disposed of	Number of loads Rubbish	Street sweepings
Western Vlei	10	6,669
Destruction	3,525	20
Depot Road	—	1,172
Botanic Gardens	11,790	1,747
Congella	3,820	380
Show Grounds	3,260	806
Sports Ground Area	29,583	1,045
Miscellaneous	2,260	6,812
Total	54,248	18,651

LABOUR.

	Rubbish	Street cleaning
Sirdars (Indian)	4	4
Collectors (Indian)	109	185
	113	189

One chief overseer, and 4 overseers (European)

Thirty three premises are receiving a tri-weekly manure removal service, for which a charge is made at the rate of 4/- per animal per month. Where animals are kept for private use, the manure is removed free of charge.

DISPOSAL OF MANURE

219 truck loads of manure were consigned under contract to Avoca, the revenue from this source amounting to £97 3s. 3d.

It will be noted that the quantity of manure disposed of has fallen off considerably from the previous year. This is due to the use of the "Baber" platform at the Albert Park, in which a considerable amount of manure is rotted for use in the parks and gardens.

A new contract for the sale of stable manure was made in the month of April, only one tender—for 1/- per ton—was received. This is only half of the price received under the previous contract, and partly accounts for the reduction in revenue from this source.

SANITARY SERVICES.

Undernoted is a list of dead animals removed and/or buried by the department.

Horses	138
Donkeys	21
Mules	28
Cattle	92
Sheep	9
Goats	2
Total	290

NIGHT SOIL.

The average number of night soil pails in use in the unsewered areas during the year under review was 913, a tri-weekly service being given to:—

Private dwellings	344
Business premises	39
Government Institutions	9
Municipal institutions	7
Private barracks	3
	402

The number of pails in use has somewhat increased during the year, owing chiefly to development in the Congella and Umbilo districts, but with the extension of the sewerage system which is now being carried out, there will shortly be a considerable reduction of the nightsoil service.

The practice of dumping refuse in lanes and on vacant land to which reference was made in the last annual report has, if anything, increased. From time to time this department cleans up the worst places, but the material so dumped is not refuse for the removal of which, the Council is responsible, and the assistance given in cleaning up in this way is obviously not appreciated, for no sooner is one lot of unsightly rubbish removed than another is being deposited.

The amount of street sweepings removed is slightly less than during the previous year, but the amount of domestic refuse removed has increased by nearly two and one half thousand loads; part of this is no doubt due to the increased number of private and business premises served, but on the basis of population, the amount per 1,000 inhabitants has increased from 500 loads per annum in the previous year to approximately 570 loads for the year under review.

A very large proportion of the refuse removed is combustible material which the occupiers could, in many cases, dispose of on their own premises by burning.

The cost of removal and disposal of refuse and street cleaning works out at 4/11.35d. per head of the population per annum. This is apparently an increase over the cost of the previous year, but calculated on the same population it works out at 4/5.12d. per head, showing a decrease in the cost of this service.

TRADE REFUSE.

The amount of refuse from hotels, boarding houses, shops, and other business premises is increasing very rapidly. When the last report was prepared, the question of amending the Bye-laws to authorize the imposition of charges for the removal of such refuse had been found under consideration by the Council. It was finally decided not to make any change from the existing arrangement under which the refuse from hotels, boarding houses, shops, and all business premises other than manufactories is removed free of charge.

REFUSE RECEPTACLES.

The requirements of the Bye-laws dealing with refuse receptacles are that they shall be "impervious to moisture," "conveniently accessible or portable and kept so closely covered as to prevent vermin and flies from gaining access to the contents". Obviously under such a bye-law there is no hope of any uniformity of type, size, or construction, and all sorts of receptacles are used for the storage of refuse.

If a regulation type of bin were specified in the bye-law, it would greatly simplify the work of seeing that the refuse was stored under satisfactory conditions pending removal. The chief difficulty in enforcing the provision of a regulation receptacle arises from the fact that the existing bye-law makes the occupier responsible for providing and maintaining

If this duty were placed on the owner, there would be a possibility of getting uniformly satisfactory conditions of storage, but it would be hopeless to try and enforce such conditions on all occupiers.

The simplest solution of the difficulty might be for the Corporation to provide and maintain all receptacles.

This would mean that instead of the burgesses paying individually for receptacles, they would pay collectively as they do now for the removal service.

A much stronger and more serviceable type of bin than is usually provided could be supplied, and by making them in large quantities, the cost would probably be less than the ordinary householder pays for a very inferior bin.

Considerable economies could also be effected if the Corporation undertook the repair of damaged bins.

CORPORATION CEMETERIES.

Interments were made as follows, viz:—

General Cemetery, Stellawood.

Europeans	33	459
Asiatics	83	325
Natives and mixed races	—	554
Total	116	1,338

Bodies received at the Borough Mortuary.

Europeans	46
Asiatics	25
Natives	45
Coloured	12
Total	128

350 grave sites were purchased in perpetuity and 92 graves are being maintained at the usual charge at Stellawood Cemetery.

LABOUR.

	General Cemetery	Stellawood
Curator	—	1
Caretaker	1	—
Sirdars	1	1
Labourers	6	17

GENERAL CEMETERY.

Ordinance 7 of 1925 authorising the Town Council to take over the control, management, up-keep, and regulation of the section of the General (Town) cemetery formerly known as the Church of England, Wesleyan, and Roman Catholic burial grounds was gazetted on June 4th 1925.

The first result of the taking over of these burial grounds is that no more ground can be sold in any part of the whole cemetery for burial purposes, although the right of burial is reserved to all who had, before certain dates, purchased grave sites in perpetuity in the cemetery.

It is hoped that more obvious improvements will shortly be apparent in the upkeep of the cemetery.

STAFF AND LABOUR.

Inspection and Administration.

Chief Inspector	1
Assistant Inspectors	10
Clerks	3
Juniors	1
Interpreter (Indian)	1
Messenger (Indian)	1

Conservancy (Night Soil)

Sirdars	2
Collectors	17

Anti-Malarial.

European Overseer	1
Indians	14

Anti-Plague.

European Overseer	1
European Rat catchers	2

Cleansing Services.

Chief Overseer	1
Overseers	4
Sirdars (Indian)	8
Indians	294

Public Conveniences.

European attendants	10
Indians	5

Barracks Management.

European caretaker	1
Indians	14

Corporation Cemeteries.

Europeans	2
Indians	25

Yours faithfully

R. WALKER,

Chief Sanitary Inspector.

RETURN OF ANIMALS, CARCASSES, AND MEAT DEALT WITH IN DURBAN MUNICIPAL ABATTOIR WITHIN THE DISTRICT OF THE DURBAN MUNICIPALITY DURING THE YEAR 30th JUNE, 1925.

ANIMALS, CARCASSES, AND MEAT FOUND TO BE AFFECTED WITH DISEASE OR OTHERWISE UNFIT FOR HUMAN CONSUMPTION.

TOTAL NUMBER SLAUGHTERED.	BOVINES. 32,175				SWINE 11,376				SHEEP 136,395				GOATS. 4,019		
		Number Infected	Number Condemned			Number Infected	Number Condemned			No. Infected	No. Condemned			No. Infected	No. Condem
DISEASES.		Carcasses	Whole Carcasses	Portions of Carcasses (App. weight in pounds		Carcasses	Whole Carcasses	Portions of Carcasses (App. weight in pounds		Carcasses	Whole Carcasses	Portions of Carcasses (App. weight in pounds		Carcasses	Whole Carcasses
Actinomycosis		26	......	1,040		......	......	......		......	......	......		......	......
Bladderworm ("Measles")	......	276	210	1,855	......	429	429	......	......	......	......	......	......	......	......
Pneumonia	......	1	1	......	......	......	......	......	......	......	......	......	......	......	......
Pyaemia, including Joint-Ill or Umbilical pyaemia	......	......	......	......	......	......	......	......	......	17	5	42	......	......	......
Sarcocysts	......	2	2	......	......	3	3	......	......	......	......	......	......	......	......
Tuberculosis	......	10	10	......	......	112	9	400	......	......	......	......	......	......	......
Bruising, Decomposition, Emaciation Fever, Immaturity, Odour (urinous), Jaundice, etc.	......	76	76	500	......	12	9	24	......	874	874	21	......	42	42
Melanosis	......	1	1	......	......	......	......	......	......	......	......	......	......	......	......
Dead in Pen	......	1	1	......	......	......	......	......							
Dead in Truck	......	1	1	......	......	......	......	......	......	7	7	......	......	......	......
Moribund	......	......	......	......	......	......	......	......	......	3	3	......	......	......	......